

EXHIBIT E

UNCERTIFIED ROUGH DRAFT

1 ROUGH DRAFT DISCLAIMER

 - - - - -

2 IMPORTANT NOTICE

 AGREEMENT OF PARTIES

3

4 We, the party working with rough draft transcripts,
 understand that if we choose to use the rough draft
5 screen or the printout, that we are doing so with
 the understanding that the rough draft is an
6 uncertified copy.

7 We further agree not to share, give, copy, scan,
 fax or in any way distribute this rough draft in
8 any form (written or electronic) to any party.
 However, our own experts, co-counsel, and staff may
9 have LIMITED INTERNAL USE of same with the
 understanding that we agree to destroy our rough
10 draft and/or any electronic form, if any, and
 replace it with the final transcript upon its

11 completion.

12 By accepting a rough draft transcript, I am hereby
13 agreeing to the above-mentioned terms, and I
14 further agree to pay for these reporting services
15 that have been provided. I also understand that
16 receipt of this rough draft will constitute an
17 order for the final transcript.

18

19 CASE: IN RE: JOHNSON & JOHNSON TALCUM POWDER
20 PRODUCTS MARKETING, SALES PRACTICES, AND PRODUCTS
21 LIABILITY LITIGATION

22 WITNESS: DANIEL CLARKE-PEARSON, M.D.

23 DATE: January 17, 2024

24

REPORTER'S NOTE:

25 Since this deposition has been in rough draft form,
26 please be aware that there may be a discrepancy
27 regarding page and line number when comparing the
28 rough draft with the final transcript.

29

24

25

2

UNCERTIFIED ROUGH DRAFT

1 Also, please be aware that the uncertified rough
2 draft transcript may contain untranslated steno,
3 reporter's notes in asterisks, misspelled proper
4 names, incorrect or missing Q/A symbols or
5 punctuation, and/or nonsensical English word
6 combinations. All such entries will be corrected
7 on the final, certified transcript.

5 COURT REPORTER: Christine Taylor, RPR

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

3

UNCERTIFIED ROUGH DRAFT

1 DANIEL CLARKE-PEARSON,

2 having first been duly sworn, was examined

3 and testified as follows:

4 (9:05 a.m.)

5 EXAMINATION

6 BY MS. DAVIDSON:

7 Q. Good morning Dr. Clarke-Pearson it's
8 night to you the up we've got a route of so I'm not
9 to go into the basics of a deposition. But
10 basically if you need a break let me know and
11 please provide verbal answers to every question
12 okay?

13 A. Okay.

14 Q. Can you state your full name for the
15 record?

16 A. Daniel Lyle Clarke-Pearson.

17 Q. Dr. Clarke-Pearson?

18 A. I'm at Chapel Hill North Carolina at

19 the Carolina.

20 Q. You still reside in North Carolina?

21 A. Yes.

22 Q. Do you have any materials with you

23 today?

24 A. Yes.

25 Q. Can you please tell me what you have

4

UNCERTIFIED ROUGH DRAFT

1 with you?

2 A. Oh, my. Predominantly publications

3 that have been listed on my reports. I have my

4 reports. I have Dr. Long oh's reports. I have

5 some specific epidemiology papers. I have a
6 reviewers document of reviewers looking at paper
7 Dr. Singh Ed wrote. I have a list of all my
8 materials considered. Two binders that have all
9 those -- all those publications, those papers and
10 materials adjacent to my table here. I have
11 invoices that I've submitted since the last
12 deposition. I believe that covers it -- covers it.

13 Q. Who prepared the binders of
14 publications and papers?

15 A. Our attorneys did.

16 Q. And when you say our attorneys, who are

17 you referring to?

18 A. Talking about Ms. O'Dell.

19 Q. And you said you have specific epi

20 papers who put those together?

21 A. I did.

22 Q. Do you have any notes on those epi

23 papers?

24 A. Yes.

25 Q. Have you produced those notes to us?

5

UNCERTIFIED ROUGH DRAFT

1 A. Not that I'm aware of.

2 Q. I'm going to request that those notes
3 be produced to us. Either during a break or if
4 they are not produced to us until after the
5 deposition we don't have any notes?

6 MS. DAVIDSON: We can't hear.

7 MS. O'DELL: We can't.

8 BY MS. DAVIDSON:

9 Q. We did not receive any notes that
10 Dr. Clarke-Pearson had on any epi papers. I need
11 to ask for those to be produced, I don't know if
12 those can be produced during today's deposition?

13 MS. O'DELL: I mean you're welcome to

14 ask him about those notes you're welcome to

15 mark the papers Dr. Clarke-Pearson be happy

16 to walk you through any notes that he has.

17 To my knowledge they're very limited. And

18 then you can ask him about him. Happy to

19 have those copies of those papers marked as

20 exhibits to the deposition but we will not

21 agree to hold the deposition open.

22 MS. DAVIDSON: Well, because the

23 deposition is remote, I don't have ability

24 to see those notes to question about them

25 and I believe they should have been produced

UNCERTIFIED ROUGH DRAFT

1 before those notes are subject to production
2 under Rule 26. So we're going to need to
3 get those I'll have to take a look and see
4 if we need to ask further questions. So we
5 will be holding the objection open you can
6 object to that.

7 MS. O'DELL: We will object to that and
8 certainly it was your decision there was no
9 order to do that. Certainly could have been
10 in here if you had chosen and made the
11 election not to do that we will try to this
12 Jessica let's just proceed we aren't going

13 to agree.

14 BY MS. DAVIDSON:

15 Q. Dr. Dr. Clarke-Pearson how did you

16 prepare for your deposition?

17 A. It's been going on for a while. Been

18 reviewing materials that -- that I've listed and

19 reviewed my reports, my general report as well as

20 reports from my patients I've reviewed literature

21 that I thought might be useful in this deposition.

22 I think that's the core of what I've done over the

23 last couple of weeks in preparing for this

24 deposition.

25 Q. Did you meet with counsel to prepare

7

UNCERTIFIED ROUGH DRAFT

1 for the deposition?

2 A. I have.

3 Q. Whom did you meet with?

4 A. Ms. O'Dell, and Dr. Thompson.

5 Q. When did you meet with them?

6 A. I'm sorry again I didn't hear you.

7 Q. When did you meet with them?

8 A. I met with them yesterday.

9 Q. For how long?

10 A. Approximately five hours.

11 Q. Have you had any other meetings with
12 them in the last few months?

13 A. We've had a zoom meeting. I'm not sure
14 when it was within the last two weeks.

15 Q. How many zoom meetings?

16 A. I believe just one.

17 Q. And how long did that last?

18 A. A few hours.

19 Q. Was that also to prepare for the
20 deposition?

21 A. Yes.

22 Q. Have you had any other meetings calls

23 or zooms to prepare for the deposition?

24 A. Can you give me a time frame?

25 Q. For this deposition?

8

UNCERTIFIED ROUGH DRAFT

1 A. For this deposition. No I don't think

2 so.

3 Q. Did you review your prior depositions

4 to prepare for this deposition?

5 A. No, I haven't.

6 Q. You were deposed in August 2021. Do

7 you recall that?

8 A. Yes.

9 Q. When is the last time you looked at
10 that deposition testimony?

11 A. I may have scanned it shortly after the
12 deposition when it became available to me. That
13 would be the last time.

14 Q. You were also deposed in 2019; correct
15 in the MDL?

16 A. Correct.

17 Q. And when is the last time you took a
18 look at that deposition?

19 A. I don't recall.

20 Q. Do you stand by all the testimony that

21 you gave in 2019?

22 A. Yes.

23 Q. And do you stand by all the testimony

24 that you gave in August 2021?

25 A. Yes.

9

UNCERTIFIED ROUGH DRAFT

1 Q. Is there any testimony from either

2 deposition that you wish to change?

3 A. Not that I'm aware of.

4 Q. Did Ms. O'Dell and Ms. Thompson show

5 you any documents to prepare for this deposition?

6 MS. DAVIDSON: You can answer that
7 question if you were shown or were not shown
8 but not the substance of what was discussed
9 or what was shown.

10 THE WITNESS: Other than one document
11 that I recall is different than documents
12 that I would have had already was the
13 journal reviewers comments about Dr. Sigh
14 Ed's paper.

15 BY MS. DAVIDSON:

16 Q. You produced 3 invoices to us this
17 week. Do you know that?

18 A. I'm sorry the fire truck just went by
19 here. Let me can you repeat that I didn't hear
20 you.

21 Q. Are you aware that you produced 3
22 invoices to defendants this week?

23 A. I produced invoices. They're here I'm
24 not sure there are three.

25 Q. All right. Let's mark those.

10

UNCERTIFIED ROUGH DRAFT

1 MS. DAVIDSON: Are you marking them all
2 as one exhibit Jessica or are you going to
3 mark them individually?

4 MS. DAVIDSON: Asher you're marking

5 collectively.

6 MR. TRANGLE: Right.

7 MS. DAVIDSON: All the 3 invoices we

8 got this week.

9 MR. TRANGLE: Correct.

10 BY MS. DAVIDSON:

11 Q. Let's make the I the so let's mark as

12 Exhibit 2 the summary of the invoices.

13 (Exhibit 2 marked for identification.)

14 BY MS. DAVIDSON:

15 Q. Thanks Asher.

16 So this document shows the five

17 invoices we received in the past from you and the

18 most recent three invoices and my math is kind of

19 lousy?

20 MS. O'DELL: Jessica.

21 MS. DAVIDSON: Both my math and my eyes

22 are lousy.

23 Dr. Clarke-Pearson so Asher if you

24 could do that thank you and then secondly

25 would you mind putting this document in the

1 chat.

2 MR. TRANGLE: Sure. Thank you.

3 BY MS. DAVIDSON:

4 Q. Dr. Clarke-Pearson this shows about

5 \$125,000. I'm sorry we don't where we're looking

6 at?

7 MS. DAVIDSON: You didn't let me finish

8 Lee maybe just wait until I'm done with my

9 question.

10 MS. O'DELL: I'm sorry, please proceed.

11 MS. DAVIDSON: I was in the middle of

12 the question.

13 BY MS. DAVIDSON:

14 Q. Dr. Clarke-Pearson for invoices 6, 7
15 and 8 in total this shows about \$128,000. Does
16 this reflect all the work you've done since
17 August 20 -- August I guess we'd say August 1,
18 2021?

19 A. No. This includes work up until
20 December 31, 2023.

21 Q. About how many hours would you say
22 you've worked since December 31?

23 A. Well I don't like to guess in a
24 deposition. So I can't tell you for sure.

25 Q. Would it be more or less than 50 hours?

UNCERTIFIED ROUGH DRAFT

1 A. Probably more than 50 hours.

2 Q. Would it be more or less than

3 100 hours?

4 A. Probably less.

5 Q. Okay. So somewhere between 50 hours

6 and 100 hours of unbilled time. When do you plan

7 to submit those bills?

8 A. After this deposition.

9 Q. All right. I'm going to request on the

10 record that that invoice be produced to us.

11 Dr. Clarke-Pearson did you somewhere between

12 October and December -- October 2021 and

13 December 2023 raise your rate from 800 to \$900 an

14 hour?

15 A. Yes, I did.

16 Q. When did you do that?

17 A. I don't remember specifically.

18 Q. And Dr. Clarke-Pearson what percentage

19 of your income would you say is derived from expert

20 testimony?

21 A. Well I'm retired at this point in time

22 so my income is quite different than it was when I

23 was in practice and working at the university. But

24 I still work at the university but on a very
25 reduced salary. In the past my income from medical

13

UNCERTIFIED ROUGH DRAFT

1 legal work was approximately about 10 percent of my
2 salary. I can't give you an exact number living on
3 social security and pension and some other
4 mandatory deductions from my retirement accounts.

5 Q. Fair to say that now that you're
6 retired it's significantly more than 10 percent?

7 A.

8 MS. O'DELL: Object to the form.

9 Excuse me object to the form.

10 THE WITNESS: It's more than 10 percent

11 yes.

12 BY MS. DAVIDSON:

13 Q. Can you estimate about what percentage

14 it is?

15 A. No I really can't.

16 Q. Is it more than 25 percent?

17 A. It may be.

18 Q. Is it more than 50 percent?

19 A. I don't think so.

20 Q. So is your best estimate that it's

21 somewhere between 25 and 50 percent of your income

22 currently is from expert work?

23 MS. O'DELL: Object to the form.

24 THE WITNESS: I just can't give you a

25 specific number. I'm sorry.

14

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. Do you know what your annual earnings

3 are from your pension?

4 MS. O'DELL: Object. He's not --

5 you're not entitled to know that information

6 Jessica so I would object to the question

7 and Dr. Clarke-Pearson you don't have to

8 respond to that.

9 BY MS. DAVIDSON:

10 Q. I am trying to determine what

11 percentage of his income comes from expert work

12 which is completely appropriate question in order

13 to determine that I need to know how much his

14 pension is?

15 MS. O'DELL: No Jessica he's giving you

16 his best estimate of the percentage. And

17 he's testified to that. You're not entitled

18 to walk through, you know, his retirement

19 accounts or any of that information. That's

20 not subject to disclosure. What you're
21 entitled to know is how much he's been paid
22 for this work in his case which we've
23 provided that information to you and he's
24 testified to and so we would object to the
25 questions about his assets.

15

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. Dr. Clarke-Pearson are you refusing to
3 testify to what percentage of your income comes
4 from expert work?

5 MS. O'DELL: So to be clear

6 Dr. Clarke-Pearson already responded to your

7 questions. And Dr. Clarke-Pearson here to

8 answer your questions that are appropriate

9 under the rules and asking him about the

10 value of his retirement, his other assets

11 those questions are inappropriate. So I've

12 instructed him not to answer.

13 BY MS. DAVIDSON:

14 Q. Dr. Clarke-Pearson, do you know how

15 much your pension is per year?

16 MS. O'DELL: Same instruction

17 Dr. Clarke-Pearson.

18 BY MS. DAVIDSON:

19 Q. I'm asking him simply if he knows. Do
20 you know how much your pension is per year I'm not
21 asking what it is?

22 MS. O'DELL: I don't know what you mean
23 by the question what he is auto his pension
24 per year Jessica. But, you know,
25 Dr. Clarke-Pearson what he knows or what he

16

UNCERTIFIED ROUGH DRAFT

1 doesn't know about his pension retirement et
2 cetera are not appropriate subject matter

3 for this deposition, but he has testified to
4 your questions about percentages to the best
5 of his knowledge.

6 MS. DAVIDSON: Well he said he doesn't
7 know and therefore I'd like to know if he
8 knows his pension because if he knows his
9 pension, then he does know what percentage
10 it is.

11 MS. O'DELL: I don't think that's what
12 he said. He gave you his estimate.

13 MS. DAVIDSON: He did not.

14 MS. O'DELL: Yes, he did.

15 MS. DAVIDSON: Can are you going to let

16 me take this deposition.

17 MS. O'DELL: I am. But I am --

18 absolutely --

19 MS. DAVIDSON: Instructing --

20 MS. O'DELL: Don't interrupt me. Let's

21 just start off -- start the day well.

22 MS. DAVIDSON: You're interrupting my

23 questions.

24 MS. O'DELL: Don't interrupt me. What

25 I said to him is he's giving you his

UNCERTIFIED ROUGH DRAFT

1 estimate of the appropriate his estimate of
2 the percentage of his current income to the
3 best of his knowledge not entitled to know
4 other information about his retirement et
5 cetera as I've stated.

6 BY MS. DAVIDSON:

7 Q. Dr. Clarke-Pearson Ms. O'Dell has
8 represented that you told me that you told me what
9 percentage is that because I didn't hear an answer?

10 MS. O'DELL: He gave an estimate
11 previously Dr. Clarke-Pearson if you want to
12 repeat the previous testimony you've given

13 about your best information you may about a
14 percentage, but other information they're
15 not entitled to.

16 MS. DAVIDSON:

17 THE WITNESS: I think my response
18 within a range of court reporter might want
19 to read back what I said.

20 MS. DAVIDSON: I'm sorry

21 Dr. Clarke-Pearson.

22 THE WITNESS: I said I gave you a range
23 25 percent was some number you throughout
24 there I said it was probably close to that

25 the court reporter could read back

18

UNCERTIFIED ROUGH DRAFT

1 specifically what I said.

2 BY MS. DAVIDSON:

3 Q. Dr. Clarke-Pearson if I ask a question

4 I am entitled to an answer rather than asking the

5 court reporter to repeat your testimony. Are you

6 testifying that it's approximately 25 percent of

7 your income that comes currently from expert work?

8 A. I don't know exactly what it is.

9 Q. I understand you don't know exactly

10 what it is but is it approximately 25 percent or

11 more than 25 percent?

12 A. I don't know.

13 Q. Have you had to travel for this

14 litigation?

15 A. With regard to this deposition?

16 Q. Have you had to travel at all with

17 respect to your MDL work?

18 A. Yes.

19 MS. O'DELL: At any point in time

20 Jessica? I'm just trying to understand what

21 your question is.

22 BY MS. DAVIDSON:

23 Q. Dr. Clarke-Pearson understood the
24 question and he said yes. When did you travel for
25 the MDL proceeding?

19

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: You're free to answer the
2 question.

3 THE WITNESS: As best I recall I went
4 to I think we stayed in Princeton New Jersey
5 and went to federal court in the MDL case.
6 I don't know the exact dates.

7 BY MS. DAVIDSON:

8 Q. Does counsel for -- sorry I thought you

9 were done?

10 A. Sorry, you too. I stopped for a

11 moment.

12 I don't recall any other travel except

13 around Chapel Hill here in North Carolina.

14 Q. Does counsel pay for plaintiffs pay

15 for your travel?

16 A. Yes, I think so.

17 Q. Do you have any requirements with

18 respect to travel?

19 MS. O'DELL: Object to the form.

20 Vague. I mean what do you mean by

21 requirements? And I'm not sure I understand

22 the question.

23 BY MS. DAVIDSON:

24 Q. Dr. Clarke-Pearson do you fly first

25 class?

20

UNCERTIFIED ROUGH DRAFT

1 A. That is a request that's on my fee

2 schedule, yes.

3 Q. Asher if you could put up the invoice

4 from October 14, 2021, which was part of Exhibit 1.

5 Dr. Clarke-Pearson do you know why there's

6 redactions on this invoice?

7 A. No, I don't.

8 MS. O'DELL: I'll represent Jessica

9 that redaction relates to a case in which

10 Dr. Clarke-Pearson's not disclosed as an

11 expert. He consulted. So you're not

12 entitled to that information, but certainly

13 we provided the number of hours extended as

14 well as the total bill.

15 BY MS. DAVIDSON:

16 Q. Dr. Clarke-Pearson?

17 MS. O'DELL: Excuse me Jessica I'm

18 sorry.

19 MS. DAVIDSON: I'm sorry Lee.

20 MS. O'DELL: I'm sorry there was a

21 little feedback here. I've just asking if

22 there was something on. Okay. Sorry about

23 that.

24 BY MS. DAVIDSON:

25 Q. Dr. Clarke-Pearson what are the

21

UNCERTIFIED ROUGH DRAFT

1 Callahan and baker cases that are referenced on

2 this sheet?

3 A. Yeah I see what you're saying. I

4 honestly don't recall, been so focused on this case
5 that I don't recall these cases that I did a little
6 bit of work on.

7 Q. And Dr. Clarke-Pearson in your expert
8 report submitted on November 2023 you stated that
9 your rate is the \$800 per hour is that an error?

10 A. That's an error. Currently it's \$900
11 an hour.

12 Q. And why did you raise your rate?

13 A. Just like other things in the economy,
14 my rate is moving with inflation I suppose, you
15 know, best way to describe it.

16 Q. Do you do any expert work for anyone

17 other than Ms. O'Dell, Ms. Thompson and Ms. Par

18 fit?

19 A. Yes.

20 Q. What other expert work do you do?

21 A. Not product liability, but other

22 medical malpractice issues.

23 Q. Have you appeared as an expert in any

24 medical malpractice cases in the last four years?

25 A. To the extent you mean appear by

22

UNCERTIFIED ROUGH DRAFT

1 deposition, court, what do you mean by that?

2 Q. Either.

3 A. In the last four years, I don't believe

4 I've had any depositions. I've just been

5 consulting with attorneys.

6 Q. In the last four years has all of your

7 expert income come from the Talc litigation?

8 A. Can I correct what I just said a minute

9 ago to your last question. I did have a deposition

10 recently within the past month. Lasted for about

11 for two hours.

12 Q. I do not believe that was disclosed

13 Leigh so I would request that you amend his

14 disclosure. What was that deposition in?

15 A. I'm sorry.

16 Q. What was the case where you were

17 deposed?

18 A. I believe it was the Albright case in

19 St. Louis.

20 Q. What does that case involve?

21 A. What does that case involve.

22 Q. I'm sorry I didn't hear?

23 A. It involves a abnormal pap smear that

24 the patient alleges was not reported to her.

25 Q. Did the patient have cancer?

UNCERTIFIED ROUGH DRAFT

1 A. She ultimately developed cancer

2 18 months after her pap smear.

3 Q. What kind of cancer?

4 A. Cervical cancer.

5 Q. Were you paid \$900 an hour for that

6 matter?

7 A. Yes. But I correct that I'm not sure I

8 may have started working with that attorney when I

9 was at \$800 an hour. I'd have to check my records

10 to be sure. It may well be \$800 an hour.

11 Q. So in the middle of that proceeding you

12 didn't raise your rates?

13 A.

14 MS. O'DELL: Object to the form.

15 THE WITNESS: I stayed with the rate

16 that I offered to work for this attorney

17 when I originally was engaged.

18 BY MS. DAVIDSON:

19 Q. In the Talc matter however you didn't

20 stay with your rate; is that correct?

21 A. I didn't stay with the rate. I got

22 approval from Ms. O'Dell to increase my rate.

23 Q. Were you retained in Albright by the

24 plaintiff or the defendant?

25 A. By the defendant.

24

UNCERTIFIED ROUGH DRAFT

1 Q. Who was the defendant?

2 A. I can't remember specifics. It was a

3 nurse practitioner and a physician that worked in a

4 clinic affiliated with Barnes Jewish Hospital in

5 St. Louis Washington University.

6 Q. Did you conclude that the pap smear at

7 been normal?

8 A. I'm sorry.

9 Q. Did you conclude that the pap smear

10 was, in fact, normal?

11 A. No it wasn't normal. I concluded based
12 on what I read on the pap smear report.

13 Q. So what was the substance of your
14 expert opinion there?

15 A. So the patient had abnormal pap smear
16 that showed some pre cancerous changes on her pap
17 smear and P H V. Human papilloma virus high risk
18 types. And the allegation is that the patient was
19 never informed about that. There's evidence that
20 the nurse practitioner who obtained the pap smear
21 tried to communicate by the patient by way of

22 telephone and left the phone mess knowledge and
23 also tried to communicate by -- through their
24 medical record which is Epic through MyChart, sent
25 a message in MyChart to the patient and the patient

25

UNCERTIFIED ROUGH DRAFT

1 never responded to either one of those attempts at
2 communication.

3 MS. O'DELL: Dr. Clarke-Pearson when
4 you say my chart do you mean your chart that
5 may be confusing.

6 THE WITNESS: Sure my chart software

7 piece in the Epic electronic medical record

8 that communicates.

9 BY MS. DAVIDSON:

10 Q. M capital M capital C Leigh?

11 MS. DAVIDSON: Okay.

12 BY MS. DAVIDSON:

13 Q. Okay. Have you published any papers

14 related to Talc since 2021?

15 A. No.

16 Q. Have you made any public statements

17 concerning Talc and ovarian cancer since 2021?

18 A. No.

19 Q. Have you spoken in a public forum and

20 Talc and ovarian cancer in since 2021?

21 A. I lecture I don't lecture I talk to the

22 medical students at the case base discussion.

23 Nearly every week. As part of my teaching

24 responsibilities. And then the course of those

25 discussions talcum powder is raised as part of a

26

UNCERTIFIED ROUGH DRAFT

1 discussion.

2 Q. Do you use slides for those

3 presentations?

4 A. No, I don't. It's a case based

5 discussion. The students are given a case to
6 review and about a dozen to 15 questions for them
7 to answer and then we have a zoom gathering where I
8 ask them to answer the questions that I've posed.
9 So one of the questions is what are risk factors to
10 ovarian cancer. The student also times I'm not
11 sure what percentage sometimes bring up talcum
12 powder as run of the research in preparing for my
13 conference and other times they'll go to the point
14 of talking about tubal ligation and hysterectomy
15 being a risk reducing procedure and we then or I
16 will then say and inform them about talcum powder
17 being a risk factor as.

18 Q. When you say is there's a case is it a
19 case of a real person?

20 A. No, it's hypothetical case so I can get
21 main points of what I want them to learn. So it's
22 a case I've made up.

23 Q. Has the hypothetical plaintiff used
24 talcum powder?

25 MS. O'DELL: Objection to form patient

27

UNCERTIFIED ROUGH DRAFT

1 not plaintiff.

2 BY MS. DAVIDSON:

3 Q. Has the hypothetical?

4 A. The hypothetical patient has ovarian

5 cancer and some of those risk factors are included

6 based you know for example the age of the patients

7 that I have hypothetically is I think in her 60s.

8 But there are many other risk factors that are not

9 part of that particular case but I ask the students

10 to expand on what other risk factors could the

11 patient possibly have.

12 Q. My question is do you state in the case

13 that the patient used talcum powder?

14 A. No.

15 Q. When did you start talking about talcum

16 powder as a risk factor to medical students?

17 A. I'm not sure I know. When, I can't

18 give you a date.

19 Q. Was it before or after you were

20 retained in this litigation?

21 A. It was probably whether I was retained

22 in this litigation. But as has been discussed in a

23 prior deposition, I became retained after I became

24 better educated about talcum powder but reviewing

25 literature at the time.

1 Q. You were -- sorry?

2 A. The literature that I was not aware of
3 to begin with.

4 Q. You were retained in this litigation in
5 2018; correct?

6 A. I believe so yes.

7 Q. Is it your testimony that you discussed
8 talcum powder as a risk factor for ovarian cancer
9 with medical students before 2018?

10 MS. O'DELL: Jessica I object to this
11 questioning the purpose of this deposition
12 is to ask questions about what's occurred

13 since his last deposition, August 2021. He
14 was asked questions about what he was
15 telling students and others in 2018 --
16 before 2018 in his first deposition. And so
17 we just ask you to focus on activity after
18 August 2021.

19 BY MS. DAVIDSON:

20 Q. Dr. Clarke-Pearson you can answer the
21 question?

22 A. I don't.

23 MS. O'DELL: Would you repeat or have
24 Jessica please I'm not sure remember it
25 Dr. Clarke-Pearson may not either.

UNCERTIFIED ROUGH DRAFT

1 MS. DAVIDSON: Court reporter can you
2 repeat my question.

3 (The reporter read the last question.)

4 THE WITNESS: I don't recall when I
5 started talk to medical students about
6 talcum powder per se.

7 MS. O'DELL: You guy can we go off the
8 record just for a moment we need to check
9 the power cord for Dr. Clarke-Pearson, so
10 let's go off the record.

11 (Recess taken from 9:37 a.m. until 9:38 a.m.)

12 Q. Dr. Clarke-Pearson have you made any

13 public statements about asbestos and ovarian cancer

14 since August 2021?

15 A. Not that I'm aware of.

16 Q. Have you spoken in any public forum

17 about ovarian cancer since August 2021?

18 A. No.

19 Q. Do you recall giving a speech at Duke

20 earlier this year entitled reflections on

21 gynecologic oncology at Duke lessons learned?

22 A. Yes.

23 Q. Did you mention Talc during this

24 lecture?

25 A. Lecture had nothing to do with ovarian

30

UNCERTIFIED ROUGH DRAFT

1 cancer.

2 Q. Is it your testimony that you didn't

3 address ovarian cancer in that lecture?

4 A. We may have talked about the research

5 that was done at Duke over the 50 years that I was

6 reviewing. I'm sure there was some discussion

7 about notation of clinical trials that we

8 participated in that we have looked at other

9 treatments -- new treatments for ovarian cancer.

10 I'm not aware I had any discussion about risk

11 factors for ovarian cancer including talc talcum

12 powder.

13 Q. Did you discuss the B R 1 gene in that

14 lecture?

15 A. I may have. That was some discovery

16 that some of my colleagues at Duke made. So that

17 was the contribution to what Duke had contributed

18 had made to the oncology.

19 Q. Did you mention 12 genetic variants

20 known to increase the risk of developing epithelial

21 ovarian cancer in that lecture?

22 A. I don't recall, no.

23 Q. Did you mention asbestos in that

24 lecture?

25 A. I don't believe I did.

31

UNCERTIFIED ROUGH DRAFT

1 Q. Do you have any forthcoming speeches or

2 presentations that relate to talcum powder?

3 A. Not that I'm aware of.

4 Q. Are you working on any materials or

5 studies that pertain to asbestos or talcum powder?

6 A. No.

7 Q. Do you still see patients?

8 A. No, I don't.

9 Q. When did you stop seeing patients?

10 A. Approximately March of 2020.

11 Q. March 2020?

12 A. Yes.

13 Q.

14 A. I may have continued. I'm not sure the

15 exact end date of the last time I interacted with a

16 patient in the clinical setting. It may have been

17 a few months later. We were doing Zoom virtual

18 visits with patients after March of 2020. I can't

19 remember exactly when my last zoom session was with
20 a patient.

21 Q. Do you still teach any classes?

22 A. Yes I teach medical students like I've
23 talked about before. I also teach residents and
24 fellows in gynecologic oncology and residents in
25 obstetrics and gynecology at UNC.

32

UNCERTIFIED ROUGH DRAFT

1 Q. As part of training residents you don't
2 see patients with them?

3 A. I stopped doing clinical work when I

4 was -- when the pandemic hit, and I had a medical
5 condition which we don't need to talk about that
6 put me at high risk to develop COVID, and I was --
7 decided to stop doing clinical work. I was in my
8 70s and felt like I had given it a good run in the
9 time that I provided care for patients and decided
10 it was time to stop the clinical work interacting
11 with patients.

12 Q. So how do you train residents?

13 A. I give lectures. I do case base
14 discussions, I mentor them. I've done some
15 collaboration with 134 publications that they were
16 working on. So that's sort of training them. Not

17 teaching them how to do surgery. I do actually now
18 that you brought that up on a consistent basis
19 every 6 weeks case face to face with residents in
20 simulation lab to teach them how to do Hispanic
21 recollect me.

22 Q. In August 2021 when you saw patients
23 was that erroneous?

24 A. That would have been a mistake if
25 that's what I said.

UNCERTIFIED ROUGH DRAFT

1 Q. Do you when you speak to med students

2 about Talc being a risk factor for ovarian cancer,
3 do you tell the med students that you are a paid
4 expert for experts in Talc litigation?

5 A. That doesn't come up sometimes it does
6 it.

7 Q. What do you mean by sometimes it does?

8 A. Sometimes sorry -- sometimes I will
9 happen to bring that up in part of the
10 conversation.

11 Q. Do you have a practice of always
12 letting students know that you're an expert in Talc
13 litigation if the subject of Talc comes up?

14 A. No, I don't.

15 Q. Do you tell residents that Talc is the
16 a risk factor for ovarian cancer?

17 A. Item he not sure I've had that
18 discussion with the residents.

19 Q. Is it still the case that you have
20 never told a patient that their ovarian cancer was
21 caused by talc use?

22 A. I'm sorry, I didn't hear your question.

23 Q. Is it still the case that you have
24 never told a patient that their ovarian cancer was
25 caused by talc use?

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to form.

2 THE WITNESS: Yes, I think I've said

3 that before. I haven't seen patients since

4 then, so I wouldn't have had that

5 conversation.

6 BY MS. DAVIDSON:

7 Q. Is there a way to know today in 2024

8 whether a woman who used talcum powder and

9 developed ovarian cancer would not have

10 developed ovarian cancer if she had not used Talc?

11 MS. O'DELL: You're coming in very

12 faintly. Our speaker has not moved, but

13 you're coming in very faintly. So would you

14 mind repeating the question.

15 BY MS. DAVIDSON:

16 Q. Court reporter, can you repeat the

17 question just so we make sure it's worded exactly

18 the same?

19 (The reporter read the last question.)

20 MS. O'DELL: Object to the form.

21 THE WITNESS: I'm not sure seems like

22 almost a double negative question you're

23 asking me. Can you make restate it in some

24 way.

25 BY MS. DAVIDSON:

35

UNCERTIFIED ROUGH DRAFT

1 Q. If a woman used talcum powder and
2 developed ovarian cancer, is there a methodology
3 cal way to know that she would not have developed
4 that ovarian cancer if she had not used Talc?

5 MS. O'DELL: Object to the form.

6 Double negative.

7 THE WITNESS: I know if she used talcum
8 powder she would be at higher risk and I
9 would talcum powder to be a cause as part of

10 the caution for her ovarian cancer. If she
11 didn't use talcum powder she could still
12 ovarian cancer of course.

13 BY MS. DAVIDSON:

14 Q. You testified in August 2021 that you
15 reached out to multiple people at ACOG to encourage
16 them to issue a statement about talc use and
17 ovarian cancer. Do you recall that?

18 A. Yes, I do.

19 Q. Have you reached out to ACOG since
20 then?

21 A. Yes, I have. I also reached to the

22 society of gynecologic oncology leadership.

23 Q. Let's mark as Exhibit 3 an October 15,

24 2021, an e-mail from the Maureen Phipps,

25 Christopher Zahn. Who are Maureen Phipps and

36

UNCERTIFIED ROUGH DRAFT

1 Christopher Zahn?

2 A. Can I get the e-mails.

3 Q. Asher is going to put it up on the

4 screen.

5 Do you know without looking at the

6 e-mail who Maureen Phipps and Christopher Zahn are?

7 A. Maureen Phipps is obstetrician

8 gynecologist who was at that point CEO of American
9 obstetrics and gynecology. Christopher Zahn I'm
10 not sure of exact title he was let's just say the
11 vice president for clinical affairs I worked with
12 him on several committees. Then I was active with
13 ACOG leadership myself.

14 Q. Do you recall an article that you sent
15 them in October 15, 2021?

16 A. I'm sorry I'm looking at my e-mail
17 here.

18 Q. It's up on the screen.

19 A. It's small. Let me look at this.

20 Q. Here Asher you can make it bigger.

21 Asher can you center it please?

22 MR. TRANGLE: It's centered on my

23 screen.

24 MS. DAVIDSON: For me the writing on

25 the right is cut off maybe not for hoarse.

37

UNCERTIFIED ROUGH DRAFT

1 THE WITNESS: I can see it. I would

2 have to go to link to be sure what this is.

3 But I think it was indicating that the FDA

4 had found asbestos in Johnson & Johnson baby

5 powder.

6 BY MS. DAVIDSON:

7 Q. This is a link to an article from Yahoo

8 finance; correct?

9 A. I see there's Yahoo <https://linkprotect.cudasvc.com/url?a=https%3a%2f%2ffinance.com&c=E,1,Dj1GTV7hssq2DGzwJvBpTI452lBT9628ngTQWus8diXvdjsu2gaqw04gKrz05TVjmPFrWDPkq0r8KHIMXfhFz0RGYYvnb2gk8QhsA-F2hF0p3J1T906g&typo=1> news

10 I'm not sure exactly 8 what it said.

11 Q. Asher can we mark the article as

12 Exhibit 4?

13 (Exhibit 4 marked for identification.)

14 MS. O'DELL: Just for the record

15 Jessica was the e-mail that was displayed on

16 the screen is that Exhibit 3 and that the

17 only portion of Exhibit 3 is that e-mail.

18 MS. DAVIDSON: I marked that as

19 Exhibit 3 we'll be going back to it.

20 MS. O'DELL: I wanted to make sure that

21 was only document included in Exhibit 3. Do

22 I understand that correctly? Do I

23 understand that correctly? Jessica there

24 was one page shown on the screen gentleman

25 when we go back to we'll check. Asher.

38

UNCERTIFIED ROUGH DRAFT

1 MR. TRANGLE: It's all one PDF, the

2 production from you.

3 MS. DAVIDSON: We're going to Leigh I

4 thought the Dr. Clarke-Pearson would know

5 what article he had sent since he didn't

6 know we need to pull up the article go back.

7 MS. O'DELL: More than fine. We just

8 saw one page if it was a multiple page

9 exhibit I wanted to understand that.

10 MS. DAVIDSON: Okay.

11 MS. O'DELL: Fair enough.

12 MS. DAVIDSON: Asher putting every

13 exhibit in the chat Leigh I will.

14 MR. TRANGLE: It's whatever you sent

15 the whole PDF that I guys is the whole

16 exhibit.

17 MS. O'DELL: Thank you Asher that was

18 my question.

19 MS. DAVIDSON: Asher Yahoo finance yes

20 please.

21 MR. TRANGLE: Adding it now.

22 BY MS. DAVIDSON:

23 Q. Dr. Clarke-Pearson you testified a

24 minute ago that you thought the article was about

25 the FDA is that what the article is about can you

UNCERTIFIED ROUGH DRAFT

1 read can you read the headline?

2 A. Certainly. It says J&J puts Talc

3 liabilities into bankruptcy.

4 Q. Why would you have sent ACOG an article

5 about J&J putting Talc liabilities into bankruptcy?

6 A. Because I wanted to make sure that ACOG

7 was J&J was put into bankruptcy that J&J's baby

8 powder had been found to have asbestos in it and

9 that ACOG should think about why J&J is going into

10 bankruptcy at this point in time.

11 Q. Would you consider this to be a

12 scientific article?

13 A. No it's a news report.

14 Q. Was it your idea to send this specific

15 article?

16 A. Yes.

17 Q. Or is this the lawyers?

18 A. My idea.

19 Q. Did anyone tell you to send this

20 article to ACOG?

21 A. No. I've been trying to communicate

22 with ACOG and SGO as you know previously on other

23 topics related to Talc and ovarian cancer that is

24 one more attempt at communicating with them.

25 Q. Did you consider sending ACOG a

40

UNCERTIFIED ROUGH DRAFT

1 scientific article about Talc and ovarian cancer as

2 opposed to news article about J and J's bankruptcy?

3 MS. O'DELL: Objection to form.

4 THE WITNESS: I believe in the past I

5 have sent them scientific articles.

6 BY MS. DAVIDSON:

7 Q. What scientific articles had you sent

8 them in the past?

9 A. I would have to go back to my e-mails

10 to answer your question.

11 Q.

12 A. As you might be aware, I if it's all

13 part of the same exhibit, my communication on

14 February 14 to ACOG and SGO has a link to

15 demonstrate 31 to 65 percent increased risk of

16 ovarian cancer in women with baby powder used twice

17 a week. That link is a scientific article.

18 Q. Who wrote that article?

19 A. I would have to pull that up to see the

20 link.

21 Q. Do you know if that article was written

22 by the paid plaintiffs expert?

23 A. I don't know you'll have to tell me who
24 the article was written by.

25 Q. Do you know if you told ACOG was

41

UNCERTIFIED ROUGH DRAFT

1 written by a paid plaintiffs expert?

2 A. Most articles usually have a disclosure
3 on them explains who -- any financial or conflict
4 of interest.

5 Q. My question is did you tell ACOG that
6 the author of the paper was a plaintiffs expert?

7 MS. O'DELL: Object to form.

8 THE WITNESS: What I told ACOG is on

9 the e-mail. I told them nothing more.

10 BY MS. DAVIDSON:

11 Q. In other words, you did not tell ACOG

12 that the article was by a plaintiffs lawyer;

13 correct?

14 MS. O'DELL: Object to the form.

15 THE WITNESS: I didn't specifically say

16 is that in this in that e-mail, no.

17 BY MS. DAVIDSON:

18 Q. Is it your testimony that this article

19 from Reuters references an FDA finding of asbestos?

20 MS. O'DELL: Are you talking about

21 Exhibit 4?

22 MS. DAVIDSON: I am. I believe you

23 said a minute ago that you sent to ACOG

24 because you wanted them to know about the

25 FDA finding of asbestos in one lot of

42

UNCERTIFIED ROUGH DRAFT

1 Johnson's baby powder. So is it your

2 recollection that this article references

3 that.

4 MS. O'DELL: So just for a moment, just

5 stop you for a moment there Jessica I think

6 Asher indicated he was going to put the
7 article in the chat. He's not done that
8 yet. So Asher if you don't mind doing that
9 the Exhibit 4 in the chat let's see I don't
10 have it in mine. So I have only the chart
11 that was previously marked regarding
12 Dr. Clarke-Pearson's invoices. So if you
13 wouldn't mind maybe putting it up again
14 maybe that's all I'm seeing at the point it
15 just appeared and so you've got a question
16 about what was said in the article then
17 Dr. Clarke-Pearson can pull it up in the

18 chat and look at the article and be able to
19 review it. So Dr. Pier if you need
20 assistance opening the article in the chat
21 we're happy to do that.

22 MS. DAVIDSON: Asher --

23 MR. TRANGLE: Yeah.

24 MS. DAVIDSON: Can you put it back on
25 the screen I will or coach the witness.

43

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: I am not.

2 MR. TRANGLE: I'll put it back.

3 MS. O'DELL: I am not. If there's an
4 article been marked been questions about
5 substance in the article he's entitled to
6 review it not just what's on the screen. So
7 if you Dr. Clarke-Pearson you can open the
8 chat and at the bottom and once you open the
9 chat then you'll be able to open that
10 article and then review it if you need to
11 and then you're welcome to respond to
12 Ms. Davidson's questions.

13 MS. DAVIDSON: Thank you for your
14 colloquy Leigh.

15 THE WITNESS: All right. Okay.

16 BY MS. DAVIDSON:

17 Q. Dr. Pier the question was you testified

18 earlier that you sent this article to ACOG because

19 you wanted ACOG to know that the FDA had found

20 asbestos in Talc. I'm wondering is it your

21 testimony that this article references that?

22 A. Actually I think I answered your

23 question once I saw what the article was. So I was

24 mistaken. This article talks about Talc the J and

25 J putting Talc liabilities in to bankruptcy.

1 Q. It doesn't mention FDA's finding

2 purported finding of Talc in one lot of --

3 MS. O'DELL: Object.

4 BY MS. DAVIDSON:

5 Q. I'm in the middle of my question,

6 Dr. Clarke-Pearson. I request that you don't

7 interrupt me and let me finish my question.

8 To your knowledge having reviewed now

9 this article which I believe is in front of you

10 there is no reference to any FDA purported finding

11 of Talc at any Johnson's baby powder; correct?

12 MS. O'DELL: Object to the form.

13 THE WITNESS: I haven't rule I asked

14 the link be opened up so I could see what
15 the article publication was. Now that I've
16 got the publication in was in front of me I
17 can read it for you. So I was miss spoken
18 if, in fact, this doesn't say that FDA found
19 Talc. I would have to reread this article
20 it's been awhile. What I was referencing
21 earlier in this brief conversation was
22 another link you were asked if I had sent
23 scientific articles to ACOG and I was
24 referencing a e-mail that I sent on
25 February 14, 2022. This is a link to a

UNCERTIFIED ROUGH DRAFT

1 scientific publication.

2 BY MS. DAVIDSON:

3 Q. And that scientific publication was

4 co- authored by plaintiffs expert; correct?

5 A. You'll have to tell me which expert

6 you're talking about.

7 Q. Do you know whether that article was co

8 authored by a plaintiffs expert?

9 A. I need to pull that article up and look

10 at all the authors to be to answer your question.

11 Q. We're going to talk about that article
12 later. So just to be clear are you -- are you
13 correcting your earlier testimony that you shared
14 this with ACOG in order to share information about
15 the FDA?

16 MS. O'DELL: Object to the form.

17 THE WITNESS: If you would like me to
18 reread this article from Reuters and be sure
19 of what I'm saying, then we can take the
20 time to read it. Otherwise I think what I
21 was trying to do was to alert ACOG to this
22 article let them read it and be aware of
23 what J and J was doing.

24 BY MS. DAVIDSON:

25 Q. Do medical associations typically make

46

UNCERTIFIED ROUGH DRAFT

1 scientific decisions based on whether a company has

2 put its a subsidiary into bankruptcy?

3 A. I think medical organizations make

4 decisions based on lots of things that are not

5 specifically scientific public opinion,

6 legislation, other information that organizations

7 are able to acquire. ACOG being concerned about

8 women's health. SGO being concerned about moving

9 with ovarian cancer and preventing ovarian cancer.

10 I would use some of this information as part of

11 their decision makings.

12 Q. Is it your opinion that the can fact

13 that lawsuits have been filed against a company

14 supports should support public health decisions?

15 MS. O'DELL: Object to the form.

16 THE WITNESS: Can I try to rephrase

17 what you asking me. Are you saying that

18 medical organizations would make decisions

19 based on the fact that the lawsuit was

20 filed?

21 BY MS. DAVIDSON:

22 Q. Or in this case based on the fact
23 according to this article that tense of thousands
24 of lawsuits were filed, correct.

25 MS. O'DELL: Object to the form.

47

UNCERTIFIED ROUGH DRAFT

1 THE WITNESS: If that's what it says in
2 this article. You know, tense of thousands.
3 So would a medical organization make a
4 decision based on that only. No of course
5 not. But it's just a piece of information
6 that they can use as they consider, go

7 through a full evaluation of the issue.

8 BY MS. DAVIDSON:

9 Q. Are you an expert on bankruptcy?

10 A. No, I'm not.

11 Q. Did anyone at ACOG respond to this

12 e-mail?

13 A. I believe we sent you an e-mail

14 response.

15 Q. Asher do you want to go back to

16 Exhibit 3 and put up ACOG's response?

17 MR. TRANGLE: I don't think I saw a

18 response for this one.

19 Q. Dr. Clarke-Pearson did ACOG send a

20 response that you did not provide to us in

21 discovery?

22 A. I'm looking at the e-mails that I have

23 in front of me which you have the same e-mails. I

24 don't -- I don't recall. I could not find a e-mail

25 response from ACOG on that topic -- on this

48

UNCERTIFIED ROUGH DRAFT

1 particular e-mail.

2 Q. There's a redacted e-mail at the top of

3 this e-mail. Is that simply you forwarding this

4 e-mail to counsel?

5 MS. O'DELL: I would represent that

6 that is the case, that's a communication

7 with counsel and that's the reason it was

8 redacted.

9 BY MS. DAVIDSON:

10 Q. So sitting here today do you know

11 whether ACOG responded to this e-mail or not?

12 A. I don't have any evidence that ACOG

13 responded.

14 Q. Are you familiar with two papers that

15 were published by a woman named O'Brien?

16 A. Yes, you want to be specific about

17 which two papers.

18 Q. Are you aware of two papers by a woman

19 named O'Brien with respect to ovarian cancer?

20 MS. O'DELL: Object to the form.

21 THE WITNESS: These two papers that

22 she's been a co author on.

23 BY MS. DAVIDSON:

24 Q. Have you sent any of the O'Brien papers

25 to either ACOG or SGO?

49

UNCERTIFIED ROUGH DRAFT

1 A. Not that I'm aware of.

2 Q. Why not?

3 A. Because if I started sending every

4 paper that came out I would be sending papers

5 outline the time. So I have not sent though to or

6 any others that have come out.

7 Q. Is it your opinion that the Yahoo

8 finance article about J&J's bankruptcy has more

9 scientific value than the O'Brien publications

10 about Talc and ovarian cancer?

11 MS. O'DELL: Object to the form

12 misstates his testimony.

13 THE WITNESS: The Reuters article is

14 not a scientific article. I think I said

15 that.

16 BY MS. DAVIDSON:

17 Q. Is it your opinion that the Reuters

18 article is more relevant to ACOG's analysis of the

19 Talc issue than the published O'Brien papers?

20 MS. DAVIDSON: Object to the form.

21 THE WITNESS: They are two different

22 issues.

23 BY MS. DAVIDSON:

24 Q. What do you mean by that?

25 MS. O'DELL: I'm sorry I didn't hear

UNCERTIFIED ROUGH DRAFT

1 that please restate the question.

2 BY MS. DAVIDSON:

3 Q. I just asked him to explain what he

4 means by that?

5 MS. O'DELL: You're coming in very

6 faint.

7 THE WITNESS: Very faint.

8 MS. O'DELL: Jessica I think it may be

9 either if you don't mind getting closer to

10 microphone.

11 MS. DAVIDSON: I am so close I'm like

12 3 inches away from my microphone.

13 MS. O'DELL: Thank you for that, but --

14 MS. DAVIDSON: Can't get closer.

15 MS. O'DELL: We can hear Christine

16 fine. So I think it's something on your

17 setup because Christine comes in loud and

18 clear when she's spoken. So if you don't

19 remind repeating that, that would be

20 helpful.

21 BY MS. DAVIDSON:

22 Q. I just asked Dr. Clarke-Pearson what he

23 meant by what he said?

24 A. Now I've lost track of what we were

25 talking about. We were talking about Reuters

51

UNCERTIFIED ROUGH DRAFT

1 article.

2 Q. I was asking you whether you believe

3 that the Reuters article is more relevant to ACOG's

4 assess of the Talc add ovarian cancer issue than

5 the O'Brien publications?

6 MS. O'DELL: Object to the form.

7 THE WITNESS: So my answer is it's a

8 piece of information that I would say it's

9 more relevant than the whole picture of

10 talcum powder causing ovarian cancer. It

11 was a point a point in time that I felt was

12 important to point out to ACOG.

13 BY MS. DAVIDSON:

14 Q. And you did not feel it was important

15 to share the O'Brien papers with ACOG is that

16 correct?

17 MS. O'DELL: Object to the form.

18 THE WITNESS: There's a lot of papers

19 that I could have shared with ACOG above and

20 beyond the O'Brien paper. I chose not to

21 continue to deluge them with papers showing

22 talcum powder causing ovarian cancer.

23 BY MS. DAVIDSON:

24 Q. Is that what the O'Brien papers show?

25 A. I'd have to look at the O'Brien paper

52

UNCERTIFIED ROUGH DRAFT

1 to answer your question.

2 Q. And when you sent this on October 15,

3 2021, was that before or after O'Brien published

4 any of her papers with respect to Talc and ovarian

5 cancer?

6 A. Again I don't know without seeing the

7 papers and dates of publication.

8 Q. All right. Let's move to the

9 valentine's e-mail to ACOG, February 14, 2022.

10 Were any of the O'Brien papers about Talc and

11 ovarian cancer published before February 14, 2022?

12 MS. O'DELL: Object to the form vague

13 Dr. O'Brien has published a number of

14 papers. And so the questions are clear.

15 MS. DAVIDSON: Leigh.

16 MS. O'DELL: Let me just finish I would

17 say further Dr. Clarke-Pearson was examined

18 about the O'Brien paper extensively in his

19 August 2021 deposition and as you know

20 Jessica this is a deposition to update his

21 testimony on any new materials since

22 August 2021.

23 BY MS. DAVIDSON:

24 Q. Dr. Clarke-Pearson, when you sent these

25 papers, this paper this link to ACOG in

53

UNCERTIFIED ROUGH DRAFT

1 February 14, 2022, was that before or after O'Brien

2 had published papers relating to Talc and ovarian

3 cancer?

4 A. I don't know the exact dates that

5 O'Brien published in this specific paper you're

6 referring to which she has co authored and authored
7 a number of papers. So some of those papers were
8 before this valentine's day 2022 e-mail that I
9 submitted.

10 Q. Why did you decide to share this --
11 this link which is the Woolen article with ACOG and
12 not the O'Brien papers?

13 MS. O'DELL: Object to the form.

14 THE WITNESS: I think this paper I mean
15 it's a powerful paper. It says that protect
16 use greater than two times a week based on
17 their analysis increases the risk of ovarian

18 cancer significantly.

19 BY MS. DAVIDSON:

20 Q. Are you aware that the link to this

21 which is the Woolen paper let's mark that as

22 Exhibit 5 Asher.

23 MS. O'DELL: If you want to get the

24 Woolen paper you can read that. We have it.

25 BY MS. DAVIDSON:

54

UNCERTIFIED ROUGH DRAFT

1 Q. Are you aware a that the Woolen

2 meta-analysis that you sent to ACOG was based on a

3 meta-analysis that was prepared for this

4 litigation?

5 MS. O'DELL: I object to the form.

6 THE WITNESS: I was not aware it has

7 anything to do with the litigation.

8 BY MS. DAVIDSON:

9 Q. Are you familiar with any of the names
10 of the authors of this paper?

11 A. Well, Smith-Bindman I know has been an
12 expert for the plaintiff I do not know her. The
13 other two authors I don't know at all.

14 Q. Is there a convention in published
15 papers have the most senior's names last?

16 A. I'm sorry senior person's name last.

17 Q. Uh-huh?

18 A. It's a convention that is usually used,

19 but I think that's agreement amongst all the

20 authors. There's only three authors in this paper.

21 Q. Let's mark O'Brien 2020 as Exhibit 6.

22 (Exhibit 6 marked for identification.)

23 BY MS. DAVIDSON:

24 Q. This is a pooled analysis correct

25 Dr. Clarke-Pearson?

1 A. Let me take a moment to pull it up.

2 Q. It's on the screen. And if you look

3 at?

4 A. Well first of all it's so small I can't

5 read it and.

6 Q. There you go?

7 MS. O'DELL: Plus happy to respond to a

8 appropriate questions but he was examined at

9 length on the O'Brien paper in his 2021

10 deposition and this deposition is for

11 purposes of you inquiring about materials

12 disclosed that are new since August of 2021

13 and so I object to any examination that goes

14 into the details of O'Brien.

15 BY MS. DAVIDSON:

16 Q. Dr. Clarke-Pearson this was a pooled
17 analysis correct if you look under design it says
18 data was pooled?

19 MS. O'DELL: Feel free to review the
20 paper until you're prepared to answer
21 questions Dr. Clarke-Pearson.

22 THE WITNESS: I'm having a hard time
23 finding it specifically.

24 BY MS. DAVIDSON:

25 Q. Can you please look at it on the screen

UNCERTIFIED ROUGH DRAFT

1 so we can move on because I have limited time here

2 today?

3 MS. O'DELL: Would you mind repeating

4 your question and/or ask Christine if you

5 would read it back.

6 BY MS. DAVIDSON:

7 Q. Dr. Clarke-Pearson this is a pooled

8 analysis of cohort studies; correct?

9 A. I see that in the abstract yes.

10 Q. Thank you.

11 A. Sorry.

12 Q. If you look at the authors are you

13 familiar with any of these authors?

14 A. Actually Dr. Callenwitz, I believe if

15 he's from Florida, I know him. We've done a little

16 bit of work together on morcellation and uterine

17 sarcoma and fibroids. O'Brien I'm only familiar

18 with because she has a number of publications. The

19 other authors I'm looking at on the screen I'm not

20 familiar with or don't know them.

21 Q. Are any of them plaintiffs experts to

22 your knowledge in this litigation?

23 A. Not that I know of.

24 Q. Are any of them NIH scientists?

25 A. I'm not sure what their affiliation is.

57

UNCERTIFIED ROUGH DRAFT

1 Q. You're not familiar with

2 Dr. Wentzensen?

3 A. Sorry.

4 Q. Wentzensen the senior author?

5 A. I'm not aware of what Dr. Wentzensen's

6 is aside from being a M.D. Ph.D.

7 Q. And you didn't send this to ACOG;

8 correct?

9 A. I'm sorry would you repeat that.

10 Q. You did not send this article to ACOG;

11 correct?

12 A. No. That's correct.

13 Q. Can we mark as Exhibit 7 Wentzensen

14 O'Brien 2021.

15 (Exhibit 7 marked for identification.)

16 BY MS. DAVIDSON:

17 Q. Please put it up on the screen Asher

18 and send it in the chat.

19 MS. O'DELL: The same objection to the

20 Wentzensen O'Brien article that article was

21 referenced and included on the materials

22 list in Dr. Clarke-Pearson's July 2021
23 report. He was examined on it during his
24 August 2, 0212, deposition at pages 15 pages
25 21, 86, 278 through 286. That was on --

58

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. High re?

3 MS. O'DELL: That was on August 26

4 deposition and.

5 MS. DAVIDSON: Instead of derail why

6 don't you wait to hear my questions to

7 determine why they actually are repeating

8 prior questions.

9 MS. O'DELL: Let me finish.

10 MS. DAVIDSON: You've now objected to

11 every single question I've asked. It's very

12 clear you're trying to drain the clock.

13 It's extremely unprofessional behavior. So

14 why don't you wait until my question and

15 then decide if you want to object to it.

16 Asher, are you putting it on the screen.

17 MR. TRANGLE: Yes.

18 MS. O'DELL: Excuse me.

19 MS. DAVIDSON: If you to object, please

20 object. Stop wasting hours and hours of
21 this deposition.

22 MS. O'DELL: I'm entitled to state
23 the -- excuse me, let me finish. I'm
24 entitled to basis excuse me please let me
25 finish you've done that in a very

59

UNCERTIFIED ROUGH DRAFT

1 professional and courteous way but the
2 purposes of these depositions are quite
3 clear and it's very clear that you want to
4 re tread ground that was previously covered

5 and I'm entitled to note my objection for
6 the record which I've done so. So if you
7 have a high level question about O'Brien and
8 Wentzensen ask it and let's move on but we
9 are going to object and get the judge on the
10 phone for any detailed retreading of old
11 material that's what I'm trying to convey to
12 you.

13 MS. DAVIDSON: I am going to have to
14 reserve the right to go beyond 7 hours
15 because Leigh you are clearly filibustering
16 and trying to fill as much of this with your

17 objections. Asher, can you please --

18 Stop interrupting me.

19 MS. O'DELL: The amount of the time for

20 the deposition is four hours just be clear

21 on that. That's what the order says.

22 That's what we'll be available for today.

23 BY MS. DAVIDSON:

24 Q. Dr. Clarke-Pearson can you read to me

25 Dr. Wentzensen and Dr. O'Brien's titles here?

60

UNCERTIFIED ROUGH DRAFT

1 A. Titles on the -- so Wentzensen from the

2 division cancer epidemiology genetics national

3 cancer institute, national institutes of health.

4 And O'Brien is epidemiology branch, national

5 institute of environmental health sciences,

6 research triangle park.

7 Q. Is either of them an expert in this

8 litigation?

9 A. Not that I'm aware of.

10 Q. Did you send there document to ACOG or

11 SGO?

12 A. No.

13 Q. Let's go off the record.

14 (Recess taken from 10:20 a.m. until 10:35 a.m.)

15 MS. O'DELL: So counsel for Johnson and
16 Johnson seeks to extend this deposition
17 beyond four hours. The plaintiffs position
18 is that that is supplemental deposition only
19 on materials that are new and
20 Dr. Clarke-Pearson's report since August of
21 2021. And we submit that the deposition
22 should be limited to four hours and we will
23 stop the deposition at that time.

24 MS. DAVIDSON: The court's order what's
25 the date of the court's order.

UNCERTIFIED ROUGH DRAFT

1 MR. TRANGLE: 101023.

2 MS. DAVIDSON: The court owes order of

3 10102023 explicitly states that general

4 causation expert sub mental depositions will

5 be four hours if the general causation

6 expert also has specific conditions it will

7 be 7 hours or 14 hours. The order could not

8 be clearer. This order was issued in

9 October 2023 so it clearly contemplated

10 supplemental reports. Dr. Clarke-Pearson

11 has amended his case specific opinions. He

12 has also added case specific materials to

13 his materials considered. If you end the
14 deposition after hour hours you are in
15 violation of the order.

16 MS. O'DELL: We disagree.

17 MS. DAVIDSON: All with opinions the go
18 less key that wasn't in the original report
19 there are material updates related to
20 Dr. Clarke-Pearson's case specific opinions
21 if this deposition ends after hour hours as
22 opposed to 14 you are in violation of the
23 court's order let's continue with the
24 deposition.

25 MS. O'DELL: We disagree with that

62

UNCERTIFIED ROUGH DRAFT

1 position. No new opinions about

2 Dr. Godleski and others, but let's proceed.

3 And that took two minutes.

4 BY MS. DAVIDSON:

5 Q. Dr. Clarke-Pearson I'd like to mark

6 your second amended report from 11/15/2023 as

7 Exhibit 8?

8 (Exhibit 8 marked for identification.)

9 BY MS. DAVIDSON:

10 Q. If we could turn to page 6 Asher?

11 MR. TRANGLE: Page 6.

12 MS. DAVIDSON: Uh-huh.

13 BY MS. DAVIDSON:

14 Q. Dr. Clarke-Pearson, is it -- Asher

15 that's not on the screen that's all the way to the

16 right?

17 MR. TRANGLE: Can you guys see it.

18 MS. DAVIDSON: No.

19 BY MS. DAVIDSON:

20 Q. Is it your opinion Dr. Clarke-Pearson

21 that Harper and Saed have demonstrated that

22 exposure to Johnson's baby powder cell

23 proliferation and malignant transformation in

24 normal ovarian epithelial cells?

25 A. Yes that's what they say in their

63

UNCERTIFIED ROUGH DRAFT

1 paper.

2 Q. I'm not asking you what they in your

3 paper. You say in your report that they have

4 demonstrated this. Is it your opinion that they

5 demonstrated these things?

6 A. That is my opinion, yes.

7 Q. Who is Dr. Saed?

8 A. He's a translational research scientist

9 as best I understand at Wayne State University

10 cancer center there.

11 Q. Is a plaintiffs expert in this

12 litigation?

13 A. I believe so.

14 Q. Had you ever heard of him prior to this

15 litigation?

16 A. He's written a review article and -- in

17 the gynecologic and journal of pretty consistently

18 I'm not sure when he wrote that article so I aware

19 of him from research he's done outside of this

20 litigation.

21 Q. Have you ever cited Dr. Singh in any
22 of your non-litigation work?

23 MS. DAVIDSON: Object to the form.

24 THE WITNESS: I'm sorry, cited him in
25 what situation?

64

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. Any non-litigation work?

3 A. No. I don't think I've written

4 anything that would require a citation about him or

5 by him.

6 Q. Had you heard of his lab before you

7 were involved in this litigation?

8 A. I'm not sure what you mean by heard of

9 his lab. I was aware of he had written a review

10 article and he was a scientist I would assume he

11 has a lab.

12 Q. Have you taken any steps to assess the

13 re liabilities of his conclusions or findings in

14 the paper that we've marked as Exhibit 8?

15 MS. O'DELL: She's just object to the

16 form and Dr. Clarke-Pearson's report I

17 believe is Exhibit 8 I'm not sure you've

18 marked the paper.

19 BY MS. DAVIDSON:

20 Q. Have you taken any steps to assess the
21 reliabilities of Dr. Saed's conclusions or findings
22 in Harper 2023?

23 A. You're referencing the Harper paper as
24 the lead author.

25 Q. Correct the one we just talked about?

65

UNCERTIFIED ROUGH DRAFT

1 A. The technique that they used to --
2 thank you Margaret. The technique that they used
3 to assess proliferation and identify malignant

4 transformation is a commercial technique and I'm
5 aware that technique is to be used in assessing
6 other chemicals and products as to their
7 carcinogenicity the chance it cause cancer. So
8 it's technique that's used in laboratories.

9 Q. What technique is that that you're
10 referring to?

11 A. Well let me turn to their paper to give
12 you the name of it. I'm sorry I'm skimming the
13 material section here to try to identify.

14 Q. I believe you testified that technique
15 they used was one you're familiar with. What

16 technique is that?

17 A. No I didn't say I was familiar with it.

18 I said I read about it enough to understand that

19 it's used more than just in his laboratory to

20 identify a products things that could cause cancer.

21 Q. Where else have you read about the

22 technique used by Dr. Singh?

23 MS. O'DELL: He's trying to review the

24 paper and answer your question Jessica if

25 you'll just give him a moment.

66

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. Dr. Clarke-Pearson if you need to
3 review the article I'd like to go off the record
4 this was listed in your materials reviewed. If you
5 want to read the article I'd like to go off the
6 record are you planning to before answering?

7 A. I'm trying to specifically find this
8 technique that they describe in their materials.
9 So I've seen the -- I'm sorry I don't have the
10 name. But the technique is described in the
11 company that manufactures it website.

12 Q. Dr. Clarke-Pearson what are you doing
13 now?

14 A. I'm looking for the rest of this paper

15 so I can see if I can help us understand what the

16 name of the methodology is that he is's using.

17 Q. Well, I don't have all day here.

18 A. I understand.

19 Q. Although I am entitled to 14 hours.

20 Your counsel in tends to cut this deposition off

21 prematurely. So if you don't know what technique

22 he used let's move on.

23 A. Okay.

24 Q. Do you know where else you read about

25 this technique?

UNCERTIFIED ROUGH DRAFT

1 A. I've looked it up on the website of the

2 company that makes -- manufactures this technique.

3 Q. Have you ever heard of Minerva before?

4 A. A November a.

5 Q. Minerva?

6 A. Minerva.

7 Q.

8 A. The publication.

9 Q. Uh-huh.

10 A. It's a scientific rear reviewed

11 publication. I'm not sure I've heard of it per se.

12 It's not something I would usually read.

13 Q. When was the last time you read an

14 article published in this journal?

15 A. Probably I've never read an article

16 published in this journal.

17 Q. Have you ever submitted an article to

18 journal?

19 A. No.

20 Q. Are you aware of a any ground breaking

21 scientific developments ever be being published in

22 this journal?

23 MS. O'DELL: Object to the form.

24 THE WITNESS: I don't have an opinion

25 on that.

68

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. Do you know of any ground breaking

3 scientific developments that were ever published in

4 Minerva?

5 MS. O'DELL: Object to the form asked

6 and answered.

7 THE WITNESS: Again I don't have an

8 opinion.

9 BY MS. DAVIDSON:

10 Q. I don't know what that means is that a

11 yes or no?

12 A. It means I don't know.

13 Q. Have you ever cited a seize from

14 Minerva in your professional work?

15 MS. DAVIDSON: Objection asked and

16 answered.

17 THE WITNESS: Not that I'm aware of.

18 BY MS. DAVIDSON:

19 Q. What's your basis for saying that

20 Harper and Saed demonstrated that Johnson's baby

21 powder causes p53 mutations?

22 A. Based on the what they say in their

23 paper.

24 Q. Did you independently evaluate whether

25 that is an accurate statement?

69

UNCERTIFIED ROUGH DRAFT

1 A. I did not do any independent

2 investigation on that topic, no.

3 Q. Did you do any independent

4 investigation on the validity of Harper and Saed's

5 claim that they have shown that exposure to

6 Johnson's baby powder causes p53 mutations cell

7 proliferation or malignant transformation?

8 A. I didn't do any separate investigation,

9 though I read the paper.

10 Q. Did you discuss the paper with anyone

11 in the field before making the statement?

12 A. No.

13 MS. O'DELL: Object to the form.

14 THE WITNESS: No, I didn't.

15 BY MS. DAVIDSON:

16 Q. I take it from your statements earlier

17 today about the materials you reviewed in

18 preparation for your deposition that you you're

19 wear that their was rejected by numerous journals

20 is that correct?

21 MS. O'DELL: I'm sorry you cut out

22 there for a minute they were rejected by.

23 BY MS. DAVIDSON:

24 Q. By several publications; is that

25 correct?

70

UNCERTIFIED ROUGH DRAFT

1 A.

2 MS. O'DELL: Object to the form.

3 THE WITNESS: I've seen a reviewers or

4 maybe more than reviewers list of comments

5 about a paper. I'm not sure it's

6 specifically this paper.

7 BY MS. DAVIDSON:

8 Q. Do you know which publications rejected

9 this paper?

10 A. Let me go to the -- what I was given.

11 Looks like the start of this says plus one.

12 Several reviewers and comments. Minor comments.

13 What I have looks like it's all review from plus

14 one.

15 Q. Do you know whether projected sciences

16 rejected this paper?

17 A. Not aware of that.

18 Q. Do you know whether this paper was

19 submitted to gynecologic oncology?

20 A. I don't know.

21 Q. Do you know whether gynecologic

22 oncology rejected this paper?

23 A. I don't know.

24 Q. What the gynecologic oncology?

25 A. It's a peer reviewed publication that

71

UNCERTIFIED ROUGH DRAFT

1 deals with gynecologic oncology topics both

2 clinical and translational research.

3 Q. Have you --

4 A. It's --

5 MS. O'DELL: Let me finish.

6 THE WITNESS: It's a publication of the
7 society of gynecologic oncologists.

8 BY MS. DAVIDSON:

9 Q. Have you published papers there before?

10 A. Yes.

11 Q. Have you been on the editorial board?

12 A. Yes.

13 Q. Have you been a peer reviewer?

14 A. Yes.

15 Q. Have you been a peer reviewer for

16 multiple journals?

17 A. Yes.

18 Q. What is a peer reviewer do?

19 A. A peer reviewer is asked to review the

20 manuscript that's been submitted. Evaluate it for

21 its content 230 lack of a better word, offer any

22 criticism, any suggestions for improvement, and

23 ultimately submit those comments which then usually

24 go back to both the editor of the journal and --

25 and the author of the manuscript.

1 Q. At gynecologic oncology have you ever
2 been responsible for selecting peer reviewers?

3 A. No, I have not.

4 Q. Do you know how gynecologic oncology
5 selects peer reviewers?

6 A. Well having been on the editorial board
7 I have some general idea that the peer reviewers
8 there's a lengthy list of possible peer reviewers
9 that have -- people have agreed to participate as a
10 peer reviewer. And then the editor I've never been
11 an editor of G Monday the to pick out peer
12 reviewers. I think I just answered that question

13 for you. The editor then goes through the panel of
14 possible reviewers and picks out a few usually two
15 or three to review the paper and submit and sends
16 that to the reviewer. The editor would look at the
17 poor reviewers and select peer reviewers that are
18 most appropriate to review that particular paper.
19 So a paper I might submit on a clinical issues
20 would not be reviewed by scientists. Likewise a
21 clinician like myself would not necessarily be
22 asked to review a translational research paper. So
23 the editor tries to match the reviewer with the
24 content and of that paper.

25 Q. So for a paper like Dr. Saed's, what

UNCERTIFIED ROUGH DRAFT

1 sort of peer reviewers would gynecologic oncology
2 look for?

3 A. I would think they would pick peer
4 reviewers laboratory research.

5 Q. Okay. Dr. Clarke-Pearson, do you know
6 whether it's biologically possible to show
7 malignant cell transformation in 72 hours?

8 A. That is what this paper says and that
9 is what the manufacturer of the technique that they
10 used says.

11 Q. If Dr. Saed found malignant cell
12 transformation after 72 hours of exposure to talc,
13 would that be a revolutionary finding?

14 MS. O'DELL: Object to the form.

15 THE WITNESS: Not that I'm aware of.

16 BY MS. DAVIDSON:

17 Q. What do you mean by that?

18 A. What do you mean by revolutionary
19 finding?

20 Q. Would that be a huge scientific
21 development for a scientist to find that exposure
22 to Talc can cause malignant cell transformation

23 after 72 hours?

24 MS. O'DELL: Object to the form.

25 THE WITNESS: Based on what I

74

UNCERTIFIED ROUGH DRAFT

1 understand about this technique, technique

2 is used to identify products that cause

3 cancer. So if this transformation is

4 considered malignant then that's what that

5 technique is showing.

6 BY MS. DAVIDSON:

7 Q. Can you identify any other situations

8 where this technique has shown malignant

9 transformation?

10 A. I have not done a literature review on
11 the use of this technique.

12 Q. You previously testified that it would
13 require 50 years of chronic inflammation or some
14 period of decades to for ovarian cancer to -- for
15 Talc exposure to cause ovarian cancer. Do you
16 recall testifying to that effect?

17 A.

18 MS. O'DELL: Object to the form Jessica
19 is there specific testimony that you're
20 referring to Dr. Clarke-Pearson testified

21 over three days and a Daubert hearing. I'm

22 asking what testimony you're beginning give

23 us page and line be happy to.

24 MS. DAVIDSON: Thank you.

25 MS. O'DELL: Leigh put that in front

75

UNCERTIFIED ROUGH DRAFT

1 of.

2 MS. DAVIDSON: Leigh, I'm taking the

3 deposition.

4 MS. O'DELL: I understand that and

5 you're obstruction is really getting out of

6 control.

7 BY MS. DAVIDSON:

8 Q. Dr. Clarke-Pearson do you recall

9 offering that testimony?

10 MS. O'DELL: Let me just state my

11 objection very briefly. That's not a

12 quotation of Dr. Clarke-Pearson. If you had

13 like to put in front of him specific

14 testimony I think that would be appropriate

15 before you ask that question.

16 BY MS. DAVIDSON:

17 Q. Dr. Clarke-Pearson do you recall ever

18 testifying that it would require chronic

19 inflammation for a period of decades for exposure

20 to Talc to cause ovarian cancer?

21 A. I think in general I'm not sure I

22 testified but I believe that it does take time with

23 chronic inflammation in the situation with Talc to

24 expose the ovary to talcum powder to result in

25 transformation the number of mutations that are

76

UNCERTIFIED ROUGH DRAFT

1 required toll result in clinical evidence of

2 ovarian cancer.

3 Q. Why would it take 50 years of chronic

4 inflammation to get malignant trans four 23

5 Dr. Saed was able to demonstrate malignant trans

6 force after 72 hours?

7 MS. O'DELL: He said decades not 50

8 gears misstates his testimony. Object to

9 the form.

10 You may answer, Doctor.

11 THE WITNESS: I think I would de four

12 to Dr. Saed and other scientists that are

13 more familiar with this technique in terms

14 of explaining how they a chief malignant

15 transformation.

16 BY MS. DAVIDSON:

17 Q. But so are you just taking it on that

18 Dr. Saed actually demonstrated malignant

19 transformation?

20 MS. O'DELL: Object to the form.

21 THE WITNESS: I have investigated the

22 technique they used the used in other

23 situations to identify carcinogenicity of

24 products like talcum powder.

25 BY MS. DAVIDSON:

77

UNCERTIFIED ROUGH DRAFT

1 Q. But sitting here today you can't

2 identify any other situations where this technique

3 has shown carcinogenicity; correct?

4 A. I would defer to the scientists that

5 have done this kind of work.

6 MS. O'DELL: Object.

7 BY MS. DAVIDSON:

8 Q. Let's mark the peer review comments on

9 Harper 2023 as Exhibit 9.

10 (Exhibit 9 marked for identification.)

11 MR. TRANGLE: Is there a page you want

12 me to go to?

13 MS. DAVIDSON: Let's go to the

14 gynecologic oncology reviewers.

15 BY MS. DAVIDSON:

16 Q. If we could go to sentence that begins

17 as presented.

18 MS. O'DELL: Give us a Bates Number no

19 that particular page.

20 MR. TRANGLE: This is page 69.

21 MS. O'DELL: Okay thank you.

22 BY MS. DAVIDSON:

23 Q. Can you center as presented ton screen

24 Asher?

25 MR. TRANGLE: It's kind of hard.

UNCERTIFIED ROUGH DRAFT

1 THE WITNESS: I don't think I have

2 that.

3 MS. O'DELL: So -- you may have a copy.

4 BY MS. DAVIDSON:

5 Q. Dr. Clarke-Pearson, could you read the

6 first two sentences of the paragraph that begins as

7 presented out loud?

8 A. Certainly. What it says as presented

9 the manuscript presents several major issues that

10 warrant the attention prior to publication.

11 Primary concern is reliance on single commercial

12 assay for assessment transformation has not been

13 established in the literature.

14 Q. Okay.

15 A. Yeah.

16 Q. I was just asking to read two sense

17 Dr. Clarke-Pearson this states that technique used

18 by Dr. Saed has not been established in the

19 literature; correct?

20 A. That's what it says, yes.

21 Q. Do you disagree with that?

22 A. I don't disagree with what it says, no.

23 Q. So it your testimony that that the --

24 that this commercial assay for assessment of

25 transformation has been established in the

79

UNCERTIFIED ROUGH DRAFT

1 literature?

2 MS. O'DELL: Objection form.

3 THE WITNESS: I'm not aware of whether

4 it has or hasn't been established. I

5 haven't done that review.

6 BY MS. DAVIDSON:

7 Q. But you are offering the opinion that

8 Dr. Saed has demonstrated malignant transformation;

9 correct?

10 A. Yes.

11 Q. Does it give you pause that the

12 commercial assay he used has not been established

13 in the literature as a reliable means for

14 assessment of transformation?

15 MS. DAVIDSON: Object to the form.

16 MS. O'DELL: Object to the form.

17 THE WITNESS: I am not aware of what I

18 read to you reviewer who semester to be

19 anonymous offering the been about the

20 reviewed established in the literature that

21 I read to you.

22 BY MS. DAVIDSON:

23 Q. And your experience does gynecologic

24 oncology have credentialed and capable peer

25 reviewers?

80

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to the form.

2 THE WITNESS: I'm not sure what you

3 mean by credentialed.

4 BY MS. DAVIDSON:

5 Q. What has been your experience about the

6 caliber of reviewers for gynecologic oncology?

7 MS. O'DELL: Object to the form if you

8 have any.

9 THE WITNESS: I mean it depends on what

10 the reviewer is being asked to do and what

11 their qualifications are so I don't know who

12 this reviewer is or what their

13 qualifications are.

14 BY MS. DAVIDSON:

15 Q. Have you done any work that would

16 enable to you disagree with what this reviewer

17 wrote?

18 MS. O'DELL: Object to the form.

19 THE WITNESS: I have not done any work

20 on that topic, no.

21 BY MS. DAVIDSON:

22 Q. The rear goes on to appropriate 125 dis

23 cal tests would were not thus the data are

24 difficult to interpret. Do you see disagree with

25 that statement?

81

UNCERTIFIED ROUGH DRAFT

1 A. So let me back up from this. This is a

2 review I'm not sure when it was done, this paper

3 was not published in GYN oncology. These were

4 comments submitted to authors and in general it's

5 been my experience as author myself of 250 some odd

6 peer reviewed papers that the comments that I've

7 received back from a reviewer after submitting a

8 manuscript are these that I would evaluate and

9 decide whether I warrant to add those edits to and

10 corrections if you will. Thin case though what

11 you're reading about statistics. Dr. Saed was

12 basically it was suggested that he do something

13 more with statistics. So this isn't a review of

14 the paper that is sitting in front of me that was

15 published in Minerva. These are comments about a

16 manuscript prior to publication that was probably

17 edited. You and I would have to go through this

18 manuscript and see whether he made those changes
19 that are being suggested by this reviewer. But
20 these comments are not necessarily comments that
21 would apply to the current manuscript that was
22 published in a peer review publication.

23 Q. To your knowledge, did Dr. Saed make
24 any changes to his statistical tests?

25 A. I would have to look at this reviewers

82

UNCERTIFIED ROUGH DRAFT

1 comments and then go to Dr. Saed's -- actually
2 Dr. Harper's paper and see whether those changes

3 were made.

4 Q. If Dr. Saed did not make changes to his
5 statistical tests would that concern you?

6 MS. O'DELL: Objection.

7 THE WITNESS: Yes I would think that he
8 take to heart those suggestions now he may
9 disagree with those discussions and not make
10 those changes and he would have to offer up
11 why he didn't make the changes maybe he is
12 perfectly confident and secure and certainty
13 that he has done and that this reviewer
14 could be wrong.

15 BY MS. DAVIDSON:

16 Q. Did you wind reducer he also said the
17 results of this study are overinterpreted, do you
18 have any reason to disagree with the GYN oncology
19 reviewer that the results of this study are
20 overinterpreted?

21 MS. O'DELL: Directing us to where
22 please I'm not seeing it on the screen I may
23 be over.

24 BY MS. DAVIDSON:

25 Q. Asher, if you can put it up on the

1 screen. Dr. Clarke-Pearson, can you respond to my

2 statement? Do you disagree -- to my question.

3 Do you disagree with the statement that

4 the results of this study are overinterpreted?

5 MS. O'DELL: Object to the form.

6 THE WITNESS: I will take that you're

7 reading this from somewhere on the screen is

8 it overinterpreted, that's that reviewer's

9 opinion.

10 BY MS. DAVIDSON:

11 Q. I'm asking juror opinion right do you

12 disagree with that comment?

13 A. This comment is being made about a
14 manuscript that was not published what we have the
15 published manuscript the probably different than
16 what this reviewer is commenting on.

17 Q. Do you have reason to believe that
18 Dr. Saed made changes to the results of his study
19 that this SGO reviewer said were overinterpreted?

20 A. Do I have reason to believe I think
21 common sense would be the author submits a paper
22 for publication and goes through the peer review
23 process and the reviewer returns comments that the
24 author would then respond to those comments.

25 Q. The reviewer told Dr. Saed stated that

UNCERTIFIED ROUGH DRAFT

1 the use of the word malignant was I were proper

2 6789 did Dr. Saed final paper use the word

3 malignant transformation?

4 MS. O'DELL: Object to the form Jessica

5 that's on the page displayed on the screen

6 Asher would you mind discussing where that

7 ease stated.

8 BY MS. DAVIDSON:

9 Q. Dr. Clarke-Pearson did the final paper

10 state that the authors had found malignant

11 transformation?

12 A. Yes it did.

13 Q. Do you believe the statement that the

14 authors had found malignant transformation is

15 overinterpreted?

16 MS. O'DELL: Object to the form.

17 THE WITNESS: No I don't believe it's

18 overinterpreted.

19 BY MS. DAVIDSON:

20 Q. What's your basis for that?

21 A. That this is work that was done with

22 assay that once again is used to identify compounds

23 that cause cancer and that the transformation of

24 these benign cells to malignant cells is

25 established by this assay.

85

UNCERTIFIED ROUGH DRAFT

1 Q. As that ever been shown in

2 peer-reviewed literature?

3 MS. O'DELL: Objection form. Asked and

4 answered.

5 THE WITNESS: I have not done any

6 further research on that topic.

7 BY MS. DAVIDSON:

8 Q. So the only research you did was

9 looking at the assay manufacturers website is that

10 correct?

11 MS. O'DELL: Object to the form.

12 THE WITNESS: Yes.

13 BY MS. DAVIDSON:

14 Q. The gynecologic oncology reviewer also

15 said that the doze of talcum powder is extremely

16 high 7 page 70 do you have an opinion as to dose of

17 whether talcum powder was extremely high?

18 MS. O'DELL: Do you have please where

19 it says that.

20 MR. TRANGLE: This is the bottom

21 reviewer number 2.

22 BY MS. DAVIDSON:

23 Q. Doctor do you have an opinion as to

24 whether or not the dose of talcum powder was

25 extremely high?

86

UNCERTIFIED ROUGH DRAFT

1 A. So I researcher can use whatever dose

2 if you will that they choose to explore. Is this

3 extremely high compared to what my thrive on a

4 women's ovaries after using talcum powder maybe so.

5 I don't know no sure. So this is the

6 interpretation this is the opinion of this

7 reviewer. I don't know what the reviewer bases his
8 opinion on what's high what's low what's
9 reasonable.

10 Q. This reducer states that the data are
11 premature restricted to two cell lines and really
12 offer no significant mechanistic insight do you
13 disagree with that statement?

14 A. Well premature I don't agree with it at
15 all because I mean the first time somebody
16 publishes something that's oftentimes considered
17 premature, it's new information. So it comes out
18 first, then would be in some people's minds

19 premature. Obviously additional research needs to
20 be done to establish certain findings. Restricted
21 to two cell lines well he used two cell lines.
22 More work needs to be done to get a third, fourth,
23 fifth cell line. And mechanistic insight I think
24 there's mechanistic insight not only in this paper
25 but in many others before that talcum powder

87

UNCERTIFIED ROUGH DRAFT

1 created oxygen reactivity nitrogen species causes
2 secondary to the inflammation that talcum powder
3 causes which then causes ultimately going down

4 through the whole chain malignant transformation.

5 Q. You can believe that can all happen

6 within 72 hours?

7 MS. O'DELL: Object to the form.

8 THE WITNESS: I believe that's what

9 that technique is showing in this particular

10 lab laboratory model, yes.

11 BY MS. DAVIDSON:

12 Q. And again that opinion is solely on the

13 assay company's website and not any published

14 scientific literature; correct?

15 MS. O'DELL: Object to the form.

16 THE WITNESS: And what is in this

17 publication.

18 BY MS. DAVIDSON:

19 Q. You testified a minute ago that you
20 don't know how the peer reviewer decided the dose
21 of talcum powder was extremely high. If you look
22 at this comment he specifically states I calculated
23 to be 263 M M for the lower dose which is unlikely
24 to ever replicate physiological dosing. Did you
25 calculate a what the dose of talcum powder was in

88

UNCERTIFIED ROUGH DRAFT

1 this experiment?

2 A. No, I did not.

3 Q. Do you have any reason to believe this
4 is in accurate?

5 MS. O'DELL: Object to the form.

6 THE WITNESS: No.

7 BY MS. DAVIDSON:

8 Q. Would this dose ever replicate
9 physiological dosing?

10 MS. O'DELL: Objection form.

11 THE WITNESS: John what physiological
12 dosing is. Many times in pharmaceutical
13 evaluation of drugs when we talk about dose
14 response and toxicity the drug is given to,

15 you know, in a laboratory setting to animals
16 or otherwise at a variety of doses and in
17 some situations defined what the maximum
18 dose is researchers will go beyond what is,
19 you know, excessively high dose and it's
20 recognized that that dose results in see ver
21 toxicity and therefore that pharmaceutical
22 product dosing is dropped down to where it's
23 safe. So I don't know it's not unreasonable
24 to use a high dose when you're investigating
25 the toxicity of a particular drug.

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. This isn't a drug though. Do you know
3 whether Dr. Saed used excessively high dose or not?

4 A. He used -- I don't know how you define
5 excessively high dose.

6 Q. It was your term?

7 A. It was the dose he used.

8 MS. O'DELL: Let him finish.

9 BY MS. DAVIDSON:

10 Q. It was your term.

11 Do you have an opinion as to the

12 whether or not the dose he used was excessively

13 high?

14 A. I don't -- it's the dose the dose is

15 what it was.

16 Q. Do you disagree with this peer reviewer

17 it was extremely high?

18 MS. O'DELL: Object to the form.

19 THE WITNESS: I don't have an opinion

20 about this peer reviewer's comments.

21 BY MS. DAVIDSON:

22 Q. This peer reviewer states that the use

23 of IHC to determine p53 mutation status is not very

24 sensitive. Do you disagree with that statement?

25 MS. O'DELL: Object to the form.

90

UNCERTIFIED ROUGH DRAFT

1 THE WITNESS: I don't disagree with
2 what you read. IHC is used to detect p53
3 mutations, both wild type and malignant
4 transformation.

5 BY MS. DAVIDSON:

6 Q. Is IHC sensitive to detecting p53
7 mutation?

8 A. Yes.

9 Q. And what's your opinion for that based

10 on?

11 A. Extensive personal experience with

12 pathologists sustaining with IHC to p53 mutations

13 in ovarian cancers in humans women that I've taken

14 care of.

15 Q. The author says that the high dosing

16 was a major experimental flaw. Did you disagree

17 with that?

18 MS. O'DELL: I'm sorry Jessica where

19 are you reading.

20 MS. DAVIDSON: Right there.

21 BY MS. DAVIDSON:

22 Q. Did you disagree that the dosing was a

23 major experimental flaw?

24 MS. O'DELL: Object to the form.

25 THE WITNESS: No as I said before,

91

UNCERTIFIED ROUGH DRAFT

1 often times in investigating the dosing of a
2 particular drug or a product in this case
3 the researcher will run a gamut of different
4 doses to evaluate that particular -- the
5 reaction of the response of cells to those
6 tissue in this case to that product in this
7 case talcum powder.

8 BY MS. DAVIDSON:

9 Q. So you disagree with this author's

10 statements that it's a major experimental flaw?

11 A. Yes.

12 Q. Let's move on the PLOS1 peer review

13 comments. The PLOS1 reviewer states quote page 101

14 Asher it was not clear or explained how an acute

15 72-hour exposure to Talc powder leads to cell

16 transformation. Do you believe that it was clear

17 or explained in the manuscript in the article how

18 an acute 72-hour exposure to talc powder leads to

19 cell transformation?

20 MS. O'DELL: Doctor if you need to

21 refer to the paper.

22 THE WITNESS: I'm not sure where we

23 are.

24 MR. TRANGLE: It's number 2 here under

25 major comments in the middle of the screen.

92

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Thank you.

2 BY MS. DAVIDSON:

3 Q. My question is do you believe it's

4 clear in the paper how an acute 72-hour exposure to

5 talcum powder leads to cell transformation?

6 MS. O'DELL: What's your question.

7 THE WITNESS: So I'm not sure again I'd

8 have to reread the paper to answer your

9 question about whether it's been explained.

10 Oftentimes in the explanation about a in the

11 evaluation of the results of a paper, that

12 occurs in the discussion section. And, you

13 know, authors choose to discuss certain

14 points and disregard other points. They

15 can't -- a discussion section could go on

16 forever and forever. So it was if it was

17 not explained it's not necessarily

18 surprising to me.

19 BY MS. DAVIDSON:

20 Q. How can a peer reviewer evaluate the

21 validity of a scientific paper if it's not

22 explained?

23 A. I'm sorry you faded out on me there.

24 Q. How can a peer reviewer evaluate the

25 validity of a scientific article if it's not

93

UNCERTIFIED ROUGH DRAFT

1 properly explained?

2 MS. O'DELL: Object to the form.

3 THE WITNESS: Because peer reviewers

4 should have the acumen, if you will, to

5 understand what going on not have to have

6 everything explained to them in the

7 discussion -- in the specific paper.

8 BY MS. DAVIDSON:

9 Q. So are you saying that fault here with

10 the peer reviewers and not the paper?

11 MS. O'DELL: I don't remember.

12 THE WITNESS: The peer reviewers may or

13 may not have understood the explanation for

14 the acute 72 hour exposure. We don't what

15 did the peer reviewer knows. The peer

16 reviewer was asking as I read this to have
17 an explanation. Doesn't mean the peer
18 reviewers doesn't no maybe the other readers
19 should have an explanation so they can
20 understand. This is the typical peer review
21 process where the peer reviewer offers up
22 suggestions about how one how they that
23 reviewer might suggest that the paper be
24 enhanced or changed to be more useful.

25 BY MS. DAVIDSON:

1 Q. Dr. Clarke-Pearson do you believe it
2 was clear and explained in the article how an acute
3 72-hour exposure to talcum powder leads to cell
4 transformation?

5 A. I don't think there was annex planning
6 in the article. I'm not sure it's required in the
7 just because this peer reviewer says it wasn't
8 explained doesn't mean it has to be the in article.

9 Q. Can you major comment number 4?

10 A. Based on the minimal amount of a data
11 provided in this manuscript the authors conclusion
12 suggests acute exposure talcum powder Talc powder
13 to ovarian epithelial cells associated with ovarian

14 cancer or outrages and not supported by the

15 manuscript's data.

16 Q. Have you ever received a comment from a

17 peer reviewer suggesting that any article you wrote

18 was outrageous?

19 MS. O'DELL: Object to the form.

20 THE WITNESS: I've had some pretty

21 unhappy comments from peer reviewers I'm not

22 sure anybody used the word outrageous. I've

23 been unhappy sometimes when I received peer

24 reviewers comments back that are you know

25 strongly negative and.

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. But nobody?

3 A. Have to just deal with that.

4 Q. Nobody used the word outrages; correct?

5 A. I'm sorry I talked over you.

6 Q. I said nobody ever called your work out

7 rage us correct?

8 MS. O'DELL: Object to the form.

9 THE WITNESS: I don't recall that.

10 BY MS. DAVIDSON:

11 Q. Do you disagree with the statement?

12 A. Yes, I think that's a little overstated

13 in terms of the emotions that are involved in with

14 this comment. I think I would have been I was not

15 happy with the way this paper was written I would

16 have been professional about it and outrageous goes

17 little bit communication with a colleague.

18 Q. Do you think the authors conclusions

19 suggesting acute exposure of talc powder to ovarian

20 epithelial cells is associated ovarian cancer are

21 valid?

22 A. That's what we've been talking about,

23 yes.

24 Q. And that view is based again no the

25 peer reviewed bit you are but based solely on the

96

UNCERTIFIED ROUGH DRAFT

1 assay society company's website; correct?

2 MS. O'DELL: Objection to form.

3 THE WITNESS: Yes.

4 BY MS. DAVIDSON:

5 Q. If we could continue the reviewer

6 states that the authors would need to conduct a

7 more diverse battery of tests to show that the

8 so-called transformed cells pose a tumor or cancer

9 cell pheno type do you disagree with that?

10 A. This is a first of its kind paper. We
11 talked about premature the word re Pratt you are
12 and I was saying this is now the first time this
13 has been published. In this format. And yes
14 additional research additional studies should be
15 done.

16 Q. But you wrote in your report that they
17 demonstrated p53 mutation cell proliferation and
18 malignant transformation?

19 A. Yes in this in this experiment and
20 doing more experiments with more cell lines maybe
21 different doses would be perfectly appropriate to

22 continue this line of investigation in the

23 laboratory.

24 Q. But it's your opinion that they have

25 already demonstrated that exposure to Johnson's

97

UNCERTIFIED ROUGH DRAFT

1 baby powder causes p53 mutations cell proliferation

2 and malignant transformation in overall epithelial

3 cells; correct?

4 MS. O'DELL: Object to the form

5 misstates his testimony.

6 BY MS. DAVIDSON:

7 Q. I literally just read from his report?

8 A. Yes and what I'm saying is I am

9 commenting with regard to this specific paper that

10 more research can be done and should be done I

11 think to continue to confirm or not confirm these

12 findings. But these findings are what they are.

13 Q. If we can move on to next reviewer.

14 This reviewer states that all claims from malignant

15 transformation should be changed to cell

16 transformation, do you agree with that comment?

17 MS. O'DELL: Why are you reading from

18 please.

19 MR. TRANGLE: This is number 5 at the

20 end of number 5 right above number.

21 BY MS. DAVIDSON:

22 Q. Call claims for malignant

23 transformation should be changed to cell

24 transformation do you disagree with that statement?

25 A. That's a suggestion of the reviewer. I

98

UNCERTIFIED ROUGH DRAFT

1 think that Dr. Harper need to take that under

2 consideration and make a decision as to whether he

3 should or shouldn't make that change that reviewer

4 is suggesting.

5 Q. Did they make that change?

6 A. I believe they tuck with malignant

7 transformation.

8 Q. Is cell transformation sufficient to

9 show malignancy?

10 A. No it's a process moving towards

11 malignancy.

12 Q. Okay. Page 104. Another peer reviewed

13 comment?

14 MS. O'DELL: So.

15 BY MS. DAVIDSON:

16 Q. The problems with the submission or too

17 numerous to count and the science methodology and

18 data cannot be trusted do you see that statement?

19 MS. O'DELL: Just a moment please.

20 Asher would you mind putting that in the

21 chat. We don't have access to that page.

22 MR. TRANGLE: Sure.

23 BY MS. DAVIDSON:

24 Q. Dr. Clarke-Pearson do you see the

25 sentence that says the problems with the submission

99

UNCERTIFIED ROUGH DRAFT

1 or too numb outside to count and the science

2 methodology and data cannot be trusted?

3 MS. O'DELL: Object to the form. I

4 think give him a moment to read what's being

5 shown not the whole page is not being shown

6 just to make sure he has it available to

7 him.

8 THE WITNESS: I've read that that's

9 what this reviewer is saying.

10 BY MS. DAVIDSON:

11 Q. Do you disagree with the reviewer's

12 statements?

13 A. I think that reviewer statement is just

14 a big overview of details that he's included in the

15 prior comments and so one would really need to go
16 back and address each one of those comments and
17 this is again -- this is a reviewers comments
18 Dr. Harper would have taken in my opinion those
19 comments and reevaluated his manuscript and
20 adjusted the manuscript to not necessarily follow
21 what the reviewer says but to consider what the
22 reviewer is suggesting or saying and rewrite the
23 manuscript as much as he needed to.

24 Q. Did Dr. Saed or Harper address any of
25 these comments to your knowledge?

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to the form.

2 THE WITNESS: The way they would

3 address the comments would be to go back to

4 their original manuscript which you and I

5 don't have I don't have it maybe you do, and

6 compare that manuscript with the manuscript

7 that got published see where the differences

8 are in that. Those differences probably

9 would reflect at least some of the comments

10 that these reviewers have been make.

11 BY MS. DAVIDSON:

12 Q. Sitting here today to do you know

13 whether Dr. Saed made any changes to the paper to
14 address these comments?

15 A. I have no knowledge one way or the
16 other on that topic.

17 Q. Have you ever received poor reviewer
18 comments saying that your science cannot be
19 trusted?

20 MS. O'DELL: Objection.

21 THE WITNESS: I'm not sure that would
22 be the terminology that would be that I've
23 seen but I've seen significant questions
24 about papers that I've submitted to asking

25 me to expand or validate and comment or redo

101

UNCERTIFIED ROUGH DRAFT

1 the statistics.

2 BY MS. DAVIDSON:

3 Q. But nobody's ever said that your

4 science cannot be trusted; correct?

5 MS. O'DELL: Object to form misstates

6 the document.

7 BY MS. DAVIDSON:

8 Q. That's correct; right?

9 MS. O'DELL: Object to the form.

10 Misstates the document does not sigh

11 science.

12 THE WITNESS: You know nobody's ever

13 said that to me or written that to me.

14 BY MS. DAVIDSON:

15 Q. Thank you. Let's go off the record.

16 (Recess taken from 11:23 a.m. until 11:34 a.m.)

17 Q. Dr. Clarke-Pearson before we left on

18 our break we were talking about peer reviewed

19 comments that were submitted with respect to

20 Dr. Saed's paper and just to recap there were two

21 peer reviewers for gynecologic oncology -- two peer

22 reviewers for PLOS1 and there were also two peer

23 reviewers for reproductive scientists. Is that

24 correct?

25 MS. O'DELL: Object to the form. I

102

UNCERTIFIED ROUGH DRAFT

1 don't know that all those documents have

2 been shown to Dr. Clarke-Pearson. So not

3 sure that's a fair question.

4 BY MS. DAVIDSON:

5 Q. I believe it was all part of the same

6 exhibit. Asher if you want to run through and show

7 on this?

8 MR. TRANGLE: Happy to.

9 BY MS. DAVIDSON:

10 Q. So we can agree there are peer reviewed
11 comments from three publications and multiple
12 reviewers for each publication.

13 You don't have these with you Leigh?

14 MS. O'DELL: I have some of these pages
15 but I don't have all of these pages. As you
16 know the production for Dr. Saed was pretty
17 extensive. So I do not have everything.

18 MR. TRANGLE: I put it in the chat when
19 I first displayed it. It's all one PDF so
20 here it says two experts.

21 BY MS. DAVIDSON:

22 Q. Do you see Dr. Clarke-Pearson where

23 gynecologic oncology says your paper has an at

24 least two experts in the field?

25 A. Yes.

103

UNCERTIFIED ROUGH DRAFT

1 Q. Okay. Let's move on to the next so

2 that's GYN oncology you agree there were two peer

3 reviewers; correct?

4 A. Yes.

5 Q. PLOS1. The it says both reviewers have

6 raised serious concerns about the experimental
7 designs and analyses of the interpretation of the
8 findings; is that correct?

9 A.

10 Q. Asher you should learn how to
11 highlight?

12 A. Yes, I see that.

13 Q. So there were two peer reviewers for
14 PLOS1; correct?

15 A. That's what it looks like, yes.

16 Q. So that's four reviewers total so far;
17 correct?

18 A. Yes.

19 Q. And are you aware that reproductive

20 scientists also rejected this paper?

21 A. I was not aware of that.

22 Q. All right. Will you now --

23 MS. O'DELL: Would you mind letting us

24 know what the Bates Number is at the bottom

25 of this document.

104

UNCERTIFIED ROUGH DRAFT

1 MR. TRANGLE: Sure. It's the same --

2 it's the same prefix and it ends in 128.

3 MS. O'DELL: Thank you. Because what

4 you put in the chat is a 284-page document

5 so --

6 MS. DAVIDSON: I can put in the chat

7 the number.

8 MS. O'DELL: I just want to make sure

9 we understood what we're seeing because I'm

10 not sure that Dr. Clarke-Pearson been shown

11 this page previously.

12 THE WITNESS: No, I have not seen this

13 one.

14 BY MS. DAVIDSON:

15 Q. Dr. Clarke-Pearson are you now aware of

16 that reproductive science also rejected this paper?

17 A. That's what I see on the screen, yes.

18 Q. Also had peer reviewers; correct?

19 A. Yes.

20 Q. And is it typical to have two peer

21 reviewers for each journal that sort of standard

22 operating journal?

23 A. I think I said earlier in the

24 conversation between you and me that sometimes 2

25 sometimes 3.

1 Q. Got it. At so he 6 peer reviewers felt

2 a that paper was not suitable for publication;

3 correct?

4 A. Yes.

5 Q. How many of these peer reviewed

6 comments had you read before you wrote your 2023

7 report?

8 A.

9 MS. O'DELL: Object to the form.

10 THE WITNESS: I have not before I wrote

11 my November 15, 2023, report.

12 BY MS. DAVIDSON:

13 Q. ; correct.

14 A. I had seen any of these comments.

15 Q. When did you first see these comments?

16 A. I believe it was yesterday.

17 Q. Are you familiar with paper called

18 Mandarino 2020?

19 A. Yes.

20 Q. Let's mark that as Exhibit 10.

21 (Exhibit 10 marked for identification.)

22 Q. If we could go back to your expert

23 report which is Exhibit 8, you added citations to

24 Mandarino; correct?

25 A. Yes this is a new publication.

UNCERTIFIED ROUGH DRAFT

1 Q. What does Mandarinino say that supports
2 your opinion here?

3 A. That talcum powder is macrophages to
4 produce increased reactive oxygen species. We
5 talked about that before. And changes in gene and
6 expression that could promote otogenic environment.

7 Q. You look like you're reading from
8 something. What are you reading from?

9 A. Reading from my report.

10 Q. Do you recognize any of the names of
11 the authors of this paper?

12 A. Let me look. Yes.

13 Q. Which name do you recognize?

14 A. Dr. Godleski.

15 Q. Can you turn the declaration of

16 interest. Do you see the declaration of interest?

17 A. Yes, I do it's on the last page before

18 references.

19 Q. Can you read the second sentence in the

20 declaration of interest?

21 A. JJG S serve as an independent expert

22 and provided expert testimony in Talc and other

23 environmentally related litigation.

24 Q. Who's JJG?

25 A. I presume it's Dr. Godleski.

107

UNCERTIFIED ROUGH DRAFT

1 Q. And Dr. Godleski is a plaintiffs

2 expert; correct?

3 A. Yes.

4 Q. Does this declaration make clear that

5 Dr. Godleski testifies on behalf of plaintiffs?

6 A. He says he give us expert testimony in

7 Talc and other environmental related litigation.

8 Q. Okay. My question was does this --

9 does this declaration of interest make clear that

10 Dr. Godleski testifies on behalf of plaintiffs?

11 A. I see what you're saying. It doesn't

12 say plaintiff, no.

13 Q. In fact, it says he's an independent

14 expert; correct?

15 A. Yes.

16 Q. How do you understand the term

17 independent expert?

18 MS. O'DELL: Object to the form.

19 THE WITNESS: I'm not sure I understand

20 what independent expert means.

21 BY MS. DAVIDSON:

22 Q. Is it your opinion that this paper

23 shows this carcinogenic properties of Talc?

24 A. Well as I said in my report just maybe

25 paraphrase it working with macrophages exposed to

108

UNCERTIFIED ROUGH DRAFT

1 talc, the macrophages in that environment increase

2 production of reactive oxygen species. It changed

3 the genes in the macrophages and decreased immune

4 surveillance all of which could, would increase the

5 risk of the patient developing cancer or the cancer

6 progressing because of decreased immune

7 surveillance of the macrophages that had been

8 damaged by talcum powder.

9 Q. Dr. Clarke-Pearson thank you for that

10 if you could try to answer my directly I'd

11 appreciate it since we are limited in our time?

12 A. Okay.

13 Q. Although there's a clear

14 misunderstanding as to how we're limited in our

15 time, I want to make clear again that based on the

16 court's ruling I do have 14 hours with you.

17 Dr. Clarke-Pearson, do you believe the

18 study shows the carcinogenic properties of Talc yes

19 or no?

20 MS. O'DELL: Object to form. Asked and

21 answered.

22 You may answer it in the fashion you'd

23 like.

24 THE WITNESS: I think I think it's

25 demonstrating mechanisms that lead to

109

UNCERTIFIED ROUGH DRAFT

1 malignant transformation.

2 BY MS. DAVIDSON:

3 Q. The authors state that their study did

4 not investigate the carcinogenic properties of Talc

5 per stay; correct?

6 A. They say changes this is in are

7 abstract changes in expression of macrophage genes

8 pertinent in cancer development and immuno

9 surveillance.

10 Q. Do the authors explicitly state their

11 study did not investigate the carcinogenic study of

12 Talc?

13 MS. O'DELL: Objection.

14 THE WITNESS: I'd have to reread. Do

15 you have a sentence you want to show me that

16 says that?

17 BY MS. DAVIDSON:

18 Q.

19 MR. TRANGLE: On the screen very bottom

20 right-hand corner last sentence on the page.

21 THE WITNESS: Study we did not

22 investigate carcinogenic properties of Talc

23 per se. Yes that's what he says.

24 BY MS. DAVIDSON:

25 Q. You disagree with the authors on that?

110

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to the form.

2 THE WITNESS: I disagree no, I don't

3 disagree with the authors that's what they

4 said they weren't -- no I mean I don't

5 disagree with them.

6 BY MS. DAVIDSON:

7 Q. Did the authors investigate whether the

8 activity this they discovered would involve an

9 increased likelihood of tumor growth?

10 A. They say what they found were changes

11 I'm quoting from them pertinent in cancer

12 development doesn't say it caused cancer

13 development these are steps leading up top cancer

14 development they are identifying in their research

15 project.

16 Q. So this paper does not show the

17 initiation of cancer in ovarian cells from Talc

18 correct?

19 MS. O'DELL: Objection.

20 THE WITNESS: Would you repeat the I

21 can.

22 BY MS. DAVIDSON:

23 Q. This paper does not show the initiation

24 of cancer in ovarian cells from Talc; correct?

25 A. That's my understanding. That's

UNCERTIFIED ROUGH DRAFT

1 correct.

2 Q. And the authors also did not show

3 whether talc has any effect on phagocytes in

4 humans?

5 A. Any effect on what.

6 Q. Phagocytes in humans?

7 MS. O'DELL: Object to the form.

8 THE WITNESS: Phagocytes in humans

9 you're saying.

10 BY MS. DAVIDSON:

11 Q. Uh-huh.

12 A. Not this model that they're using.

13 They weren't using human cells, as I recall.

14 Q. And they didn't test whether Talc has

15 any kind of mutagenic or transform active effect on

16 human cells of any kind; correct?

17 MS. O'DELL: Object to the form.

18 THE WITNESS: That's correct. They

19 used an animal model that's common in

20 laboratory research.

21 BY MS. DAVIDSON:

22 Q. In fact, used rodent cells; right?

23 A. I'd have to look at the specific I know

24 they weren't human cells.

25 Q. Did the authors determine whether the

112

UNCERTIFIED ROUGH DRAFT

1 changes they found were unique to Talc?

2 MS. O'DELL: Would you mind repeating

3 the question, please? I couldn't hear it.

4 I'm sorry. Would you mind repeating the

5 question, please? I'm sorry, I couldn't

6 hear that.

7 BY MS. DAVIDSON:

8 Q. The authors determine whether the

9 changes they found are unique to talc?

10 A. They were unique to talc when they

11 compared it with other products such as titanium

12 objection tied and urban air son dense diesel part

13 sells.

14 Q. If we could turn to page 9 sentence

15 beginning we also did not aim?

16 MR. TRANGLE: The bottom of the left

17 column.

18 BY MS. DAVIDSON:

19 Q. Can you read the sentence that begins

20 we also did not aim.

21 Asher if you could highlight it?

22 A. I see it.

23 Q. Can you read that sentence aloud?

24 A. So we did not -- let me look it we did

25 not aim to determine whether the changes we found

113

UNCERTIFIED ROUGH DRAFT

1 are unique to Talc. The focus of our experiments

2 was to demonstrate whether Talc is inert with

3 ephasotized in a high estrogen milieu.

4 That was their intent.

5 Q. So they did not aim to determine

6 whether the changes were unique to Talc; correct?

7 MS. O'DELL: Objection to form.

8 THE WITNESS: Well there may be other

9 products that could cause similar changes.

10 The products that they used that I just

11 identified including titanium objection side

12 did not cause the same changes that Talc

13 did.

14 BY MS. DAVIDSON:

15 Q. And did this study examine Gene

16 expression levels or mutations?

17 A. I think it looked at Gene expression

18 models.

19 Q. Is a change in Gene expression the same

20 as inducing a mutation?

21 A. No.

22 Q. Do changes in Gene expression levels

23 always lead to cancer genesis?

24 A. No.

25 Q. Did this study use already malignant

114

UNCERTIFIED ROUGH DRAFT

1 cancer cells?

2 A. I believe they did.

3 Q. Okay. Let's move on to Exhibit 11,

4 2021?

5 A. I'm sorry what are you doing.

6 Q. Exhibit 11 put on I'm 2021?

7 (Exhibit 11 marked for identification.)

8 BY MS. DAVIDSON:

9 Q. Emi 21 transcriptomic and epigenomic

10 effects of insoluble particles on J774 of

11 macrophages. Are you familiar with that paper?

12 MS. O'DELL: Let me get it in front of

13 him. Okay.

14 BY MS. DAVIDSON:

15 Q. Dr. Clarke-Pearson you cited this paper

16 in your paper; correct in your supplemental report?

17 A. Yes.

18 Q. Why?

19 A. Because it again is a new in vitro
20 research paper that shows the effect of talcum
21 powder on cell proliferation immuno response
22 signaling immuno surveillance it poptociceal. So
23 all those things that can lead to ovarian cancer.

24 Q. Does the study examine effects on human
25 ovarian cells?

115

UNCERTIFIED ROUGH DRAFT

1 A. Let me just double-check.

2 No I think it's again a muring model, a

3 mass model.

4 Q. And what type of cell does it look at?

5 MS. O'DELL: Object to the form asked

6 and answered.

7 THE WITNESS: Well, they were

8 chromosomally female cells which is relevant

9 to women getting ovarian cancer. And widely

10 used in macrophage and phagocyte --

11 phagocyte model cell lines.

12 BY MS. DAVIDSON:

13 Q. It discusses the effects of

14 macrophages?

15 A. Yes.

16 Q. Are those ovarian cells?

17 A. No these are the macrophages part of

18 the immune system that is stimulated by reactive

19 oxygen species in chronic inflammation.

20 Q. What did Emi find about titanium

21 dioxide?

22 MS. O'DELL: Objection. Form.

23 BY MS. DAVIDSON:

24 Q. Do you recall whether this paper found

25 the titanium dioxide also leads to gene expression

116

UNCERTIFIED ROUGH DRAFT

1 and transcription in phagocytes?

2 A. I'd have to reread it. I believe it

3 does to a lesser degree.

4 Q. Does that surprise you?

5 A. Not necessarily. I mean it's a foreign

6 body as well, that can simulate an inflammatory

7 response but apparently not as much as talcum

8 powder.

9 Q. So both talcum powder and supposed

10 control titanium dioxide led to changes in

11 phagocytes correct?

12 MS. O'DELL: Sob re I didn't here it.

13 BY MS. DAVIDSON:

14 Q. Did you get the question?

15 (The reporter read back the last question.)

16 A. And my answer is question.

17 Q. Does M E say anything about cancer

18 genesis?

19 MS. O'DELL: Object to the form.

20 THE WITNESS: Not that I recall.

21 BY MS. DAVIDSON:

22 Q. And again it doesn't use human cells;

23 correct?

24 A. No it doesn't. It uses mouse cells.

25 Q. Doesn't use ovarian cells; correct?

UNCERTIFIED ROUGH DRAFT

1 A. That's correct.

2 Q. And it's exogenic expression, not
3 malignancy; correct?

4 MS. O'DELL: Object to the form.

5 THE WITNESS: It identifies gene
6 expression yes.

7 BY MS. DAVIDSON:

8 Q. So this paper does not examine whether
9 Talc causes mutations; correct?

10 MS. O'DELL: Objection form.

11 THE WITNESS: It doesn't identify

12 mutations you're correct.

13 BY MS. DAVIDSON:

14 Q. So how does the study support your

15 opinion that Talc causes ovarian cancer?

16 A. Would you repeat that question.

17 Q.

18 (The reporter read back the last question.)

19 Q.

20 A. Right so those are all studies showing

21 mechanisms that result from chronic inflammation

22 caused by Talc. And those properties that are

23 induced, that inflammation reactive oxygen species

24 immune alterations, alterations apoptosis, many

25 other things are all components of what results in

118

UNCERTIFIED ROUGH DRAFT

1 the development of ovarian cancer caused by Talc.

2 Q. Is it still your opinion that the

3 mechanism by which Talc allegedly cause his ovarian

4 cancer is through inflammation?

5 A. Absolutely.

6 Q. If we can mark as Exhibit 12 Fong 2022.

7 In your report you cite this paper, Fong 2022. Do

8 you recall that?

9 A. I do.

10 Q. Do you know who the authors were of

11 this paper?

12 A. It's a consortium there's multiple

13 authors.

14 Q. Do you recognize the name Daniel

15 Kramer?

16 A. I'm sorry, what about.

17 Q. Do you recognize that name?

18 A. Yes.

19 Q. How do you recognize his name?

20 A. He's been involved with several peer

21 reviewed publications regarding talcum powder

22 causing ovarian cancer.

23 Q. Is a he plaintiffs expert in this

24 litigation?

25 A. I believe he has been.

119

UNCERTIFIED ROUGH DRAFT

1 Q. If we could turn to his disclosure.

2 A. Where is that at the end of the paper?

3 Q. Asher putting up on the screen?

4 MS. O'DELL: Published version.

5 BY MS. DAVIDSON:

6 Q.

7 MS. DAVIDSON: I'm going to read his

8 disclosure.

9 BY MS. DAVIDSON:

10 Q. D W C reports payments for expert

11 testimony from Ferraro law firm and Ashcraft and

12 Gerel law firm. Do you see that?

13 A. I just found it, yes.

14 Q. Does this sentence state whether

15 Dr. Kramer is an expert for plaintiffs or for

16 defendants?

17 MS. O'DELL: Object to the form.

18 THE WITNESS: He doesn't he doesn't say

19 plaintiff or defendant.

20 BY MS. DAVIDSON:

21 Q. Does it say that he's an expert in Talc
22 litigation?

23 A. No says he's an expert working with
24 these two law firms and also with grant funding
25 from NIH.

120

UNCERTIFIED ROUGH DRAFT

1 Q. Someone reading this disclosure would
2 not know that Dr. Kramer is an expert for
3 plaintiffs in Talc litigation; correct?

4 MS. O'DELL: Object to the form.

5 THE WITNESS: I don't have an opinion

6 about what people would know.

7 BY MS. DAVIDSON:

8 Q. Does this sentence make clear that

9 Dr. Kramer is an expert for plaintiffs in Talc

10 litigation?

11 A. No.

12 Q. Thank you. Let's move on to mark as

13 Exhibit 13 Woolen 2022 we've talked about this

14 paper; correct?

15 A. Yes.

16 (Exhibit 13 marked for identification.)

17 BY MS. DAVIDSON:

18 Q. This is the paper that you sent to ACOG

19 and SGO; correct?

20 A. Yes.

21 Q. Following those submissions by you to

22 ACOG and SGO did they change any of their public

23 statements with respect to Talc?

24 A. I'm not aware of any changes.

25 Q. Following your submissions to ACOG and

121

UNCERTIFIED ROUGH DRAFT

1 SGO have they issued any statements suggesting that

2 Talc is a risk factor for ovarian cancer?

3 A. Not that I'm aware of.

4 Q. Okay. Have you read Dr. Smith buy

5 men's reports in this litigation?

6 A. Her report?

7 Q. Uh-huh.

8 A. I have not read her expert report, no.

9 Q. And as a result you're not aware that

10 Dr. Smith-Bindman the meta-analysis that led to

11 Woolen paper in her litigation report is that

12 correct?

13 MS. O'DELL: Object to the form

14 misstates the evidence.

15 THE WITNESS: I'm not aware.

16 BY MS. DAVIDSON:

17 Q. Were you aware that Dr. Smith-Bindman
18 did meta-analysis for this litigation before this
19 paper was published?

20 A. I was not aware.

21 Q. Were you aware that Dr. Woolen received
22 Dr. Smith-Bindman's litigation report before
23 setting out to do the study?

24 MS. O'DELL: Objection form.

25 THE WITNESS: I was not aware of that.

1 BY MS. DAVIDSON:

2 Q. And you were not aware of the 9 of the

3 11 studies in this paper had already been the

4 subject of a litigation meta-analysis; correct?

5 MS. O'DELL: Objection to the form.

6 THE WITNESS: I was not aware of that

7 either.

8 BY MS. DAVIDSON:

9 Q. Are you familiar with the term post hoc

10 analysis?

11 A. Somewhat, yes.

12 Q. What does that mean?

13 A. It means after the study has been done,
14 somebody not necessarily the primary researcher but
15 somebody could have access to the database and
16 reanalyze the database for asking another question
17 that might be contained in the data that's there.

18 Q. Do you do post hoc analyses raise any
19 issue with respect to scientific integrity?

20 MS. O'DELL: Object to the form.

21 THE WITNESS: No I think scientific
22 integrity obviously ties back to publication
23 otherwise if it's just sitting on somebody's
24 desk it's not -- doesn't mean anything. So
25 that integrity goes through the peer

123

UNCERTIFIED ROUGH DRAFT

1 reviewed process before it gets published

2 and identifying, you know, in the manuscript

3 that it's a post hoc analysis is important

4 for full disclosure.

5 BY MS. DAVIDSON:

6 Q. Is the a reliability of a meta-analysis

7 contingent on proper selection of studies and data

8 sets?

9 MS. O'DELL: Objection.

10 THE WITNESS: I would say yes.

11 BY MS. DAVIDSON:

12 Q. Did Woolen 2022 include the prospective
13 data from a O'Brien 2020 fold analysis?

14 MS. O'DELL: Objection form.

15 THE WITNESS: It obtained it -- I had
16 included information supplied by O'Brien
17 from the Minerva study one that as I
18 understand it had not been published
19 previously.

20 BY MS. DAVIDSON:

21 Q. Do you know why Woolen 2022 did not
22 include prospective data from O'Brien 2020

23 published?

24 MS. O'DELL: Objection to form the data

25 in 2020 is different than the data that was

124

UNCERTIFIED ROUGH DRAFT

1 supplied by O'Brien for this Woolen paper.

2 BY MS. DAVIDSON:

3 Q. Do you know what the reason for that

4 is?

5 A. Because O'Brien hadn't published

6 previously on daily exposure in the previously

7 published national health study -- national health

8 study participants.

9 Q. Did O'Brien 20220 use the term frequent

10 exposure?

11 A. I have to go back to O'Brien 2020.

12 Q. Why don't we mark O'Brien 2020 I think

13 we did actually?

14 MR. TRANGLE: We did.

15 Q. O'Brien 2020 was Exhibit 6 let's put

16 that up Asher we want to move things along we'll

17 come back to this.

18 BY MS. DAVIDSON:

19 Q. If you could turn -- Dr. Clarke-Pearson

20 if you could look up on the screen just to move

21 things along. Do you see where it says exposure.

22 Exposures in the abstract?

23 A. Looking at the abstract.

24 Q. Do you see on the screen the word

25 exposures?

125

UNCERTIFIED ROUGH DRAFT

1 A. There's lots of words on the screen.

2 Q. There's addressing on the screen?

3 A. I got I can't okay.

4 Q. Can you read what it says?

5 A. Yeah says exposures ever Lang term

6 greater than 20 years and frequent. Greater than

7 once a week.

8 Q. Okay. So?

9 A. Once a week.

10 MS. O'DELL: I don't think he was

11 finished.

12 BY MS. DAVIDSON:

13 Q. So before Woolen was ever published

14 O'Brien had defined the term frequent is that

15 correct?

16 MS. O'DELL: Object to the form.

17 A. I think it's.

18 MS. O'DELL: Object to the form you may

19 answer.

20 BY MS. DAVIDSON:

21 Q. Doctor --

22 A. I --

23 MS. O'DELL: Let him finish his answer,

24 please, Jessica.

25 BY MS. DAVIDSON:

126

UNCERTIFIED ROUGH DRAFT

1 Q. Dr. Clarke-Pearson, I just was going to

2 repeat the question because there was so much

3 chatter by Leigh. Before --

4 A. Okay. Go ahead.

5 Q. Before Dr. Woolen published her

6 meta-analysis Dr. O'Brien in her paper had defined

7 the term frequent as greater or equal to one week

8 is that correct?

9 MS. O'DELL: Object to the form.

10 BY MS. DAVIDSON:

11 Q. Once a week?

12 MS. O'DELL: Object to the form.

13 THE WITNESS: I believe that's what the

14 report in this 2020 paper, yes.

15 BY MS. DAVIDSON:

16 Q. Does Dr. Woolen explain anywhere in her

17 paper why she decided to deviate from Dr. O'Brien's

18 definition of the word frequent?

19 MS. O'DELL: Objection to form.

20 THE WITNESS: Well she I mean frequent

21 can have many definitions. And Dr. Woolen

22 has chosen the definition that slightly

23 different than the did he have nation that

24 Dr. O'Brien used in the 2020 paper.

25 BY MS. DAVIDSON:

127

UNCERTIFIED ROUGH DRAFT

1 Q. How many of the papers we can go back

2 to Woolen Asher. How many of the papers sited in

3 Woolen involved two days per week of use?

4 A. As I review -- as I see Table 2 it

5 would appear that all those papers would be at

6 least two days per week.

7 Q. Do any of them involve two or three

8 days per week of use?

9 MS. O'DELL: Object to form.

10 THE WITNESS: Not that I see in the

11 column on Table 2.

12 BY MS. DAVIDSON:

13 Q. Do any of them involve 4 days a week of

14 use?

15 MS. O'DELL: Objection to the form.

16 THE WITNESS: They could.

17 BY MS. DAVIDSON:

18 Q. Which would that be?

19 A. Four days -- four days per week for

20 example Chang 25 times per month. That's almost --

21 that's almost daily if you exclude her men men's

22 central period during that month. So that would be

23 every day of that month the patient in the Chang

24 studies were exposed. So that's 4 or 5 or 6 days

25 per week.

UNCERTIFIED ROUGH DRAFT

1 Q. Are I any of them limited to just four
2 days per week?

3 A.

4 MS. O'DELL: Objection to the form.

5 THE WITNESS: Mills has 4 to 7 times
6 per week.

7 BY MS. DAVIDSON:

8 Q. Do you know if Dr. Woolen used the data
9 from mills for four times per week?

10 A. I have no reason to think she didn't.

11 Q. When you said excluded men's truly

12 period Asher please turn off your screen. When you

13 said excluded -- excluding menstrual period what

14 did you mean by that?

15 A. What did I mean.

16 Q. Uh-huh?

17 A. Well, most women in this study were pre

18 menopausal. And likely in my humble opinion having

19 a men's central period once a month. So if we look

20 at 30 days per month on an average month, several

21 of those days when the patients having menstrual

22 period those women may or may not be using tall

23 couple powder during that time. But 25 times per

24 month is not necessarily 30 times per month like

25 every day but 25 times per month would expose the

129

UNCERTIFIED ROUGH DRAFT

1 patient to and answer your question four times per

2 peek.

3 Q. That would be much more than four times

4 per week; correct?

5 A. It could be.

6 Q. Well, if you take 30 and you divide it

7 to 25 that's almost every day; right?

8 A. 25 out of 30 is almost every day yes.

9 Q. I was asking if you're aware of any

10 data they used based on use only four days a week?

11 A. I didn't understand your question that

12 way could you repeat it now.

13 Q. Are you aware of any data used by

14 Woolen that involved use of just four days per

15 week?

16 A. Woolen defined frequent use as two or

17 more times per week. So four times per week is

18 greater than two times per week so she included

19 patients that had four times per week.

20 Q. Which of the underlying papers used by

21 Woolen involved use just 2 to 4 times per week?

22 MS. O'DELL: Objection to form.

23 THE WITNESS: I'm not aware of any of

24 those papers that were just two times per

25 week.

130

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q.

3 A. All of them were more than all of them

4 were more than two times per week.

5 Q. Are you aware of any papers that are

6 were just three times a week?

7 A.

8 MS. O'DELL: Object to form.

9 THE WITNESS: No.

10 BY MS. DAVIDSON:

11 Q. Are you aware of any papers that were
12 just four times per week?

13 A. I think you just asked me that
14 question.

15 Q. Your answer was not clear?

16 A. My answer was that four times per week
17 is in the mills study.

18 Q. Dr. Clarke-Pearson, why would a woman
19 who has her period not use talcum powder?

20 A. It's a personal preference. I mean I
21 don't know I'm not a woman and I've used talcum
22 powder. Never been around anybody that I can
23 personally say used talcum powder to give me just
24 informal answer. So I mean obviously I'm aware of
25 studies where women have used on peroneal pad when

131

UNCERTIFIED ROUGH DRAFT

1 they're having their period.

2 Q. I just wanted to understand the basis
3 for your statement earlier that about taking out
4 the time that woman has her period?

5 A. I think exposure to talcum powder is
6 more likely when the patient not having her period
7 when the reproductive tract doesn't have blood
8 flowing out of it. So talcum powder can ascend to
9 the ovary and tubes.

10 Q. So is it your opinion that talcum
11 powder is less likely to ascend a woman's genital
12 tract when she has her period?

13 A. Yes.

14 Q. All right. Let's go off the record for
15 five minutes.

16 (Recess taken from 12:13 p.m. until 12:23 p.m.)

17 Q. Dr. Clarke-Pearson, would it have been

18 more accurate for the Woolen paper to have defined

19 frequent outside as four days or more of use given

20 what you saw in Table 2?

21 MS. O'DELL: Object to the form.

22 BY MS. DAVIDSON:

23 Q. Table 1 sorry. Was it wait?

24 MS. O'DELL: Object to the form.

25 BY MS. DAVIDSON:

132

UNCERTIFIED ROUGH DRAFT

1 Q. Let me just make sure?

2 MR. TRANGLE: It's 2.

3 MS. DAVIDSON: Asher can you put it

4 back on up to the let me re-ask the again.

5 BY MS. DAVIDSON:

6 Q. Based on our review before the break of

7 Table 2 would it have been more accurate to define

8 this study as looking at use of four days or more

9 per week?

10 MS. O'DELL: Object to the form.

11 THE WITNESS: So now you're sounding

12 exactly like the peer reviewers make it

13 should be looked at differently. My answer

14 to you is this is what Dr. Woolen chose to

15 use greater than two times per week. She

16 could have looked at it four times per week.

17 BY MS. DAVIDSON:

18 Q. But Dr. Clarke-Pearson, she did look at

19 it as only four times per week or more. We

20 concluded before the break that Table 2 does not

21 show any data for use between two and four days a

22 week; right?

23 MS. O'DELL: Object to the form.

24 THE WITNESS: Between two and four days

25 peer week. No I mean you had asked me about

1 four days a week. I cited the mills paper.

2 BY MS. DAVIDSON:

3 Q. Right. So Dr. Clarke-Pearson, the

4 Woolen paper does not use any data for two or three

5 days per week of use; correct?

6 MS. O'DELL: Objection to the form.

7 THE WITNESS: It used two or greater

8 days per week.

9 BY MS. DAVIDSON:

10 Q. Two or three?

11 A. Two or three.

12 MS. O'DELL: Object.

13 THE WITNESS: It would have included

14 three two or more days per we can would

15 include three.

16 BY MS. DAVIDSON:

17 Q. If someone used if there were papers

18 that reported on Talc use for two or three times

19 per week was that covered in Table 2?

20 MS. O'DELL: Object to the form.

21 THE WITNESS: Those patients would be

22 included in Table 2.

23 BY MS. DAVIDSON:

24 Q. Patients who only used Talc two or

25 three days a week are included in Table 2?

UNCERTIFIED ROUGH DRAFT

1 A. Two or more days per week are included

2 in Table 2.

3 Q. Where in Table 2 can if you point me to

4 patients who used Talc either two days a week or

5 three days a week?

6 A. So I think what you're trying to say is

7 specifically only two days per week or only three

8 days per week. Is that what you're trying to say?

9 Q. Correct, sir.

10 A. I see so there's no specific

11 identification of that sort of patient.

12 Q. So wouldn't be more accurate if this

13 paper stated that it defined frequent use as four

14 or more days per week?

15 MS. O'DELL: Object to the form.

16 THE WITNESS: They could have but they

17 chose to use greater than two days we are

18 per week.

19 BY MS. DAVIDSON:

20 Q. Where are the data for two or three

21 days per week?

22 MS. O'DELL: Objection. Form.

23 THE WITNESS: This is greater than two

24 days per week. All these studies, the 11

25 studies of patients that receive that use

135

UNCERTIFIED ROUGH DRAFT

1 talcum powder two or more days per week.

2 BY MS. DAVIDSON:

3 Q. But, in fact, the only data are people

4 who use Talc four or more days per week correct?

5 MS. O'DELL: Object to the form.

6 THE WITNESS: I think that probably

7 would be correct.

8 BY MS. DAVIDSON:

9 Q. Do you know if there are data available

10 anywhere from any of these studies that would

11 reflect two or three days per week of use?

12 A. Not that I know of in these stubbed

13 studies, no.

14 Q. Would you be surprised to learn that

15 some of these studies do include data for use that

16 correlates to two or three days per week?

17 MS. O'DELL: Object to the form.

18 THE WITNESS: If they use two or three

19 days per week then they would have been

20 using two or more days per week which would

21 be included in this analysis.

22 BY MS. DAVIDSON:

23 Q. So it's your testimony that if any of

24 the studies listed in able 2 provided data for two

25 days per week of use they would have been included

136

UNCERTIFIED ROUGH DRAFT

1 here; correct?

2 MS. O'DELL: Objection form.

3 THE WITNESS: Two or more days per week

4 would be included in this study, yes.

5 BY MS. DAVIDSON:

6 Q. Are you aware that when it came to

7 O'Brien the Woolen authors only used data for

8 patent women?

9 A. I didn't hear whole question.

10 Q. Are you aware that the Woolen authors

11 only used data for patent women from the N H S 1

12 study?

13 A. Yes. That was harmonized with many of

14 the other studies of the other ten where the

15 authors chose to only focus on patients that had

16 patent fallopian tubes and intact uterus.

17 Q. Can you point to a single one of those

18 tone studies that focus on patent women?

19 A. Individual to go back to those studies

20 and look at them I know some in there.

21 Q. So it's testimony that some of those

22 ten studies are reported in Table 2 only for patent

23 women?

24 A. That included only patency, yes.

25 Q. How many of the ten?

137

UNCERTIFIED ROUGH DRAFT

1 A. I don't know I'd just told you I'd have

2 to go back and look at them. That's why they

3 harmonized. You wouldn't harmonize with patients

4 didn't have patency and report it under footnote

5 number 5.

6 Q. Would it surprise you that not a single

7 one of those ten other studies actually was

8 restricted to women with patent reproductive

9 tracts?

10 MS. O'DELL: Objection to form.

11 THE WITNESS: Again I would have to

12 look at those study.

13 BY MS. DAVIDSON:

14 Q. Would it surprise you if it were the

15 case that not one of those ten studies was limited

16 to women with patent reproductive tracts?

17 MS. O'DELL: Objection to the form.

18 THE WITNESS: I don't know because I

19 would have to look at the studies again.

20 BY MS. DAVIDSON:

21 Q. But you testified a few moments ago

22 that it was done to harmonize with these other ten.

23 Is that still your testimony?

24 A. That's what the author said in footnote

25 number 5.

138

UNCERTIFIED ROUGH DRAFT

1 Q. Do you know if that's accurate?

2 A. I believe it is.

3 Q. What is that belief based on?

4 A. My understanding is that some of these

5 other studies one through 10 included -- focused

6 only on patients with patent fallopian tubes.

7 Q. What's that understanding based on?

8 A. On having previously read these papers.

9 I at that time this moment cannot tell you which

10 papers have patency as their criteria.

11 Q. Do you have an opinion as to whether

12 it's some, most, of those ten?

13 A. I'd have to review those papers.

14 Q. If none of the studies in 1 through 10

15 is restricted to women with patent reproductive

16 tracts would that footnote that we just looked at

17 about harmonization be inaccurate?

18 MS. O'DELL: Object.

19 THE WITNESS: Hypothetical question if

20 none of them had patency.

21 BY MS. DAVIDSON:

22 Q. If none of those ten studies is limited

23 to patency, then is footnote number 5 about

24 harmonization accurate?

25 MS. O'DELL: Object to form.

UNCERTIFIED ROUGH DRAFT

1 THE WITNESS: Hypothetical case yes.

2 But I don't know why they would say

3 harmonize if there were none had patency as

4 part of their criteria okay.

5 BY MS. DAVIDSON:

6 Q. Okay. Could we look at the data that

7 are listed here for Wu. On line 10?

8 A. I see it.

9 Q. Great, Asher. Asher has mastered

10 highlighting. Excellent.

11 A. Yeah, that's terrific.

12 Q. Let's do that going forward, Asher. I

13 was going to ask you on a break to chat with

14 paralegal and figure it out, and we're glad you've

15 mastered that important skill that they do not

16 teach in law school.

17 Dr. Clarke-Pearson we're look at the Wu

18 study right that's a case controlled study from

19 2009 you read that study before; correct?

20 A. Yes.

21 Q. And the data provided here for Wu says

22 greater than 30 times per month; correct?

23 A. Yes.

24 Q. And so how many times we are week is

25 that?

140

UNCERTIFIED ROUGH DRAFT

1 A. Well assuming that there's a 30 to

2 31 days a month it seems like it would be every

3 day.

4 Q. Correct. Do you know whether Wu do you

5 recall from your review of that paper where it also

6 provided you can leave that Asher are you familiar

7 whether Wu also provided data with respect to women

8 who used Talc ten times per month?

9 MS. O'DELL: Object to the question or

10 to one we need to get the paper in front of
11 Dr. Clarke-Pearson. Wu is a study that was
12 produced sometime ago. It was involved or
13 was cited in his first report and he was
14 examined it on his first deposition. Wait a
15 moment and we'll put it in front of.

16 BY MS. DAVIDSON:

17 Q. I would like to note for the record
18 that Ms. O'Dell is my object about a study that's
19 included in a paper that's in your current report.

20 Dr. ?

21 MS. O'DELL: That's not the basis of my
22 objection. I'm saying this is not a memory

23 test and he is entitled to see a study that
24 he's being asked about specific questions
25 about the data that's all. And just give a

141

UNCERTIFIED ROUGH DRAFT

1 moment he's happy to answer your questions.
2 But we just need to get the study in front
3 of him.

4 BY MS. DAVIDSON:

5 Q. Dr. Clarke-Pearson do you know
6 whether -- what are you looking at right now?

7 A. I'm looking at the paper trying to

8 find.

9 Q. Which paper?

10 A. The information that you're asking me

11 about with regard.

12 Q. Which paper?

13 A. With regard to utilization what's that.

14 Q. Which paper are you looking at?

15 A. The Wu paper is that.

16 Q. Because we're doing this video I

17 appreciate you if you look at isn't up on the

18 screen.

19 A. Oh, certainly this is Wu 2015.

20 Q. Do you have an --

21 A. You want to me it.

22 Q. Do you have notes on Wu 2015?

23 A. No, I don't.

24 Q. Okay. Do you know whether?

25 A. 2009.

142

UNCERTIFIED ROUGH DRAFT

1 Q. Do you know whether Wu provided there's

2 a lot of movement in the room?

3 A. I'm being handed copy of is the paper

4 you wanted to talk about which is 2009.

5 Q. Dr. Clarke-Pearson, do you know whether

6 Wu 2009 provided data from multiple time periods of

7 use?

8 A. I don't recall.

9 Q. Do you know whether they provided data

10 for multiple frequencies of use?

11 A. I'm looking at a table that says yes.

12 Be happy to look at that table with you if you

13 like.

14 Q. Dr. Clarke-Pearson if somebody uses a

15 product ten times a month per more how many days a

16 week is that?

17 A. You're averaging this out so that would

18 be probably on average 3 days per week.

19 Q. So that would be more than two days;

20 right?

21 A. Yes.

22 Q. So if the Wu study had provided data

23 for use ten times per month, that would have

24 satisfied the Woolen criteria of more than two

25 times per week; correct?

143

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to form.

2 THE WITNESS: I think we just averaged

3 that out. So ten times per month so ten --

4 ten out of 30, let's call a month 30 days.

5 So that's one out of three days so that

6 would be two or three times per week.

7 BY MS. DAVIDSON:

8 Q. So if Wu had reported data for use ten

9 times or more per month that would have satisfied

10 the frequent definition used by Woolen; correct?

11 MS. O'DELL: Objection. Form.

12 THE WITNESS: I believe it would.

13 BY MS. DAVIDSON:

14 Q. But Woolen only used the date for 30

15 times or more per month; correct?

16 A. That's what I think I recall from

17 the -- the table you had up earlier.

18 Q. We can put Table 2 back up. Do you

19 know why Woolen would have used data for 30 times

20 per month as opposed to data for ten times per

21 month?

22 A. I can only speculate as to what

23 Dr. Woolen was thinking maybe ten times per month

24 didn't satisfy her criteria for greater than two

25 times per month or per week.

1 Q. We've done the math and two times per

2 month is more than two times per week; correct?

3 MS. O'DELL: Object to form.

4 THE WITNESS: That's on average.

5 BY MS. DAVIDSON:

6 Q. Just the same way that 30 times per

7 month on average is once a day; correct?

8 A. That's correct.

9 Q. Let's move on.

10 Do you know how Woolen came to the

11 conclusion that two timings a week reflects

12 frequent use?

13 A. No, I don't.

14 Q. Are you aware that in

15 Dr. Smith-Bindman's expert report she also defined

16 regular use and she defined that as three times a

17 per week?

18 MS. O'DELL: Object to form.

19 THE WITNESS: You called it -- I'm

20 sorry, I don't recall. She called it what,

21 did you say?

22 BY MS. DAVIDSON:

23 Q. Are you aware that Dr. Smith-Bindman

24 meta-analysis for the litigation was based on

25 defined regular use as three times per week?

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Objection.

2 THE WITNESS: I think I already

3 indicated I hadn't read her report, so I

4 don't recall that.

5 BY MS. DAVIDSON:

6 Q. And therefore you also don't know why

7 she changed her exposure metric from three times

8 per week to two times per week; correct?

9 MS. O'DELL: Objection to form.

10 THE WITNESS: So you're saying Woolen

11 paper because Ms. Bindman is a co-author had

12 something to do with the definition. I

13 don't have any opinion about that. I'm

14 speculating.

15 BY MS. DAVIDSON:

16 Q. Let me ask you another question. If we

17 could look at Table 1 of Woolen 2022. Do you know

18 what the Newcastle Ottawa scale is?

19 A. Only vaguely this is a metric a tool if

20 you will that bio statisticians use. In general my

21 own view is that it's sort of talks about the

22 strength of a study. Grades the strength of a

23 study so as you'll see in the far left hand there's

24 a column there that has a total score, but that's

25 about as much as I can tell you.

146

UNCERTIFIED ROUGH DRAFT

1 Q. Do you recall any other publication

2 that you've reviewed for purposes of this

3 litigation that uses the Newcastle Ottawa score --

4 scale?

5 A. Can I check on one.

6 Q. Sure. Which one are you checking on?

7 A. I'm looking at Lynch.

8 That may not be correct so I'm not

9 aware of the studies that have used that.

10 Q. Sorry. I didn't mean to interrupt you.

11 Sometimes it's hard to tell when you're done.

12 A. I understand. I'm not aware of other

13 studies that have used the Newcastle scale, but ...

14 Q. Do you recall a meta-analysis called

15 Taher?

16 A. Maher?

17 Q. Taher.

18 A. Taher, yes.

19 Q. Do you recall whether they used the

20 Newcastle Ottawa scale?

21 A. That's a memory test, I don't recall.

22 Q. Asher why don't we put that up on the
23 screen. Wait a minute. Let me just look at my
24 numbers. I believe Taher or Taher I don't know
25 would be Exhibit 14.

147

UNCERTIFIED ROUGH DRAFT

1 (Exhibit 14 marked for identification.)

2 BY MS. DAVIDSON:

3 Q. So we're marking at Exhibit 14?

4 A. Did you get it for me marching Brett.

5 MS. O'DELL: Give me a moment Jessica

6 to put the Taher paper in front of him.

7 Obviously he was examined on the Taher paper
8 during his 2019 deposition and at least and
9 possibly the 2021 deposition.

10 BY MS. DAVIDSON:

11 Q. Asher can you put the Taher paper up or
12 is this the Taher paper that's up?

13 MS. DAVIDSON:

14 MR. TRANGLE: This is it.

15 BY MS. DAVIDSON:

16 Q. Can you turn to page 1 go back to that.
17 Taher, critical review of the association between
18 perineal use of talcum powder and risk of ovarian

19 cancer. It's a meta-analysis. Do you recall this

20 paper?

21 A. I do.

22 Q. Okay. This is Exhibit 14 and if we

23 could turn to page 90. It says the quality of

24 included study his with assessed using the

25 Newcastle Ottawa scale does that refresh your

148

UNCERTIFIED ROUGH DRAFT

1 recollection?

2 A. Yes. Yes.

3 Q. Have you I take it since you did 23409

4 recall that that you have not compared the Woolen

5 papers scores for the underlying studies with the

6 Taher papers scores for the underlying studies; is

7 that correct?

8 A. That's correct I have not compared.

9 Q. Would it surprise you to know that the

10 Woolen paper rated every single component case

11 controlled study higher on the Newcastle Ottawa

12 scale than Taher did?

13 A. I don't know if there's anything that

14 surprises me. I mean there's differences of

15 opinion about quality which are -- which are not

16 quantitative but qualitative evaluations of papers.

17 Q. Do you know why Woolen would have
18 scored every single study higher than Taher did?

19 MS. O'DELL: Objection to the form.

20 THE WITNESS: I don't know I only be
21 conjecting -- only be guessing.

22 BY MS. DAVIDSON:

23 Q. And so do you know -- do you know how
24 many of the nine case controlled studies listed
25 here were rated higher than Woolen than by Taher?

149

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to form.

2 THE WITNESS: I don't know I'd have to

3 put the two studies side by side.

4 BY MS. DAVIDSON:

5 Q. Do you recall that Taher said that

6 these case controlled studies provided only a week

7 evidence?

8 MS. O'DELL: Object to form.

9 BY MS. DAVIDSON:

10 Q. If we could turn to that Asher?

11 Can you read the Asher has highlighted

12 in yellow Taher?

13 A. Sure. Using grade pro for the

14 assessment, the certainty of the evidence was

15 classified as very low.

16 Q. Did Woolen agree with that in her

17 paper?

18 A.

19 MS. O'DELL: Object to the form.

20 BY MS. DAVIDSON:

21 Q. In their paper the in the Smith paper?

22 A. I don't know if she commented on it.

23 I'm not sure what grade pro is.

24 Q. Do you disagree with Taher that the

25 certainty of the evidence is very low?

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to the form.

2 THE WITNESS: That's what he says. I

3 don't -- I don't agree or disagree.

4 BY MS. DAVIDSON:

5 Q. Okay. If Woolen had used all women

6 from N H S one instead of the just patent women do

7 you know if it would have affected the results of

8 the paper?

9 A. I'm not aware of that data, so I don't

10 know how it would have affected the results.

11 Q. What's the typical age when the woman

12 gets a tubal ligation?

13 A. Typical age. Well once she's decided
14 she doesn't want to have anymore children one. I
15 would have to -- I don't know the data from my
16 experiences as a gynecologist. I would say
17 somewhere between 35 and 40.

18 Q. And do you know what the typical age is
19 when women start using Talc?

20 A. My understanding in the teenage years
21 once they start having periods.

22 Q. So if you are only looking at patent
23 women, you're probably excluding a lot of women who
24 could have used talc for upwards of a decade or

25 two; correct?

151

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Objection to form.

2 THE WITNESS: Yes.

3 BY MS. DAVIDSON:

4 Q. And does just to be clear, you would be

5 excluding women who have used talc for a decade or

6 two before their tubal ligation; right?

7 A. Yes, from the time of teenage years

8 until whenever had their tubes tied.

9 Q. Okay. If we could go back to the Wu

10 paper?

11 A. I'm sorry the Wu paper.

12 Q. Uh-huh. We were talking about on the

13 Wu paper if we could go to Table 3?

14 A. Oh, I'm sorry one second.

15 Q. Table 2 sorry. Table 2 of the Wu

16 paper?

17 A. Yes.

18 Q. Which we're going to mark as Exhibit 15

19 because I never marked Wu.

20 (Exhibit 15 marked for identification.)

21 For women who used Talc greater than

22 ten but less than 30 times a month, is the

23 statistical -- is the association identified by Wu

24 statistically significant?

25 MS. O'DELL: Objection, form. 20

152

UNCERTIFIED ROUGH DRAFT

1 years, greater than 10, less than 30 times a

2 month, is that the line? Thank you.

3 THE WITNESS: I'm sorry. Was your

4 question statistically significant.

5 BY MS. DAVIDSON:

6 Q. Correct.

7 A. And the answer is no it -- overlaps

8 one.

9 Q. Of all the associations listed here,
10 for different periods of use how many are
11 statistically significant?

12 A. So greater than 20 years and greater
13 than 30 times per month is statistically
14 significant.

15 Q. So only one is statistically
16 significant; correct?

17 A. If you go up to --

18 Q. I just mean in this section. In this
19 section that looks at frequency and duration.

20 A. Just frequency and duration, not the

21 lines above it?

22 Q. Correct.

23 A. Yes, then that's -- one second. Well

24 then if you go down they're statistically

25 significant increased greater than 200 times per

153

UNCERTIFIED ROUGH DRAFT

1 month or per year.

2 Q. I'm looking at --

3 MS. O'DELL: Please don't interrupt.

4 Jessica, it may be difficult to understand

5 Doctor. If you're not hearing him, let us

6 know, but he wasn't finished with his

7 answer. And if you'd kindly let him finish,

8 I think the record will be clear.

9 BY MS. DAVIDSON:

10 Q. Dr. Clarke-Pearson I'm just talking

11 about the subsection that says frequency and

12 duration of talc use, not total times. If you just

13 look at the subsection entitled frequency and

14 duration of Talc use, there are one, two, three,

15 four five -- there are six point estimates there;

16 correct?

17 A. Yes.

18 Q. And one, two, and four of those six
19 involve use of at least two times per week because
20 four of those 66 involve use of greater than ten
21 times per month the second one the third one the
22 fifth one and the 6th one. Asher be great if you
23 high light them. So --

24 MS. O'DELL: Finished with your answer?

25 Object to form.

154

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. So if you see the four that are

3 highlighted, we've highlighted the four point

4 estimates from Wu that involve use on average of

5 more than two days per week; correct?

6 A. Yes.

7 Q. And of those four only one is

8 statistically significant; correct?

9 A. Yes.

10 Q. And of those four the one with the

11 highest relative risks is the one that was used by

12 Woolen in her paper; correct?

13 A. I believe so.

14 Q. Okay. Thank you. You can take that

15 down.

16 Is there a scientific definition for

17 frequent use of Talc?

18 MS. O'DELL: Objection to form. Asher

19 if you would please put Wu in the chat I

20 would appreciate it thank you.

21 THE WITNESS: To answer your question,

22 Ms. Davidson I'm not aware of any specific

23 definition of what was -- I'm sorry what was

24 your term frequent use?

25 BY MS. DAVIDSON:

1 Q. Yeah. That was a subjective decision

2 by the authors how to define frequent use; correct?

3 MS. O'DELL: Objection.

4 THE WITNESS: Yes, I have no problem

5 with that at all.

6 BY MS. DAVIDSON:

7 Q. I'm just asking you was a subjective

8 decision by the authors I'm not asking whether you

9 had a problem with it?

10 MS. O'DELL: Objection to form.

11 THE WITNESS: Yes that's a decision by

12 the authors.

13 BY MS. DAVIDSON:

14 Q. Thank you. And nowhere in their paper
15 do they explain how they came to that decision;
16 correct?

17 A. Not that I'm aware of. A reviewer
18 might have asked them to do that if they felt that
19 was important.

20 Q. Do you know how much the sample size
21 would have increased if the authors had not limited
22 the N H S one data to patent women?

23 A. No, I don't.

24 Q. Do you know if it would have doubled?

25 A. I don't know.

UNCERTIFIED ROUGH DRAFT

1 Q. Do you know if it would have tripled?

2 MS. O'DELL: Doctor, just let us know

3 when you get --

4 A. I would have to go back to the original

5 Bryant paper to answer your question.

6 Q. What's the N C P I D Q?

7 A. What is it?

8 Q. Uh-huh?

9 A. It's a publication that the NCI puts

10 out for information as my recollection is they have

11 a version for hey people and a version for

12 physicians.

13 Q. Do you know if the NCI -- when is the

14 last file you looked at the NCIPDQ?

15 A. Probably whichever.

16 Q. When is the last time you looked at

17 NCIPDQ with respect to ovarian cancer?

18 A. Yesterday.

19 Q. Do you recall whether it addresses

20 Woolen?

21 A. I would have to look and see. They

22 have references it's not all inclusive.

23 Q. But you don't recall even though you

24 looked at it yesterday even if it addresses Woolen?

25 A. So it has 14 references of Woolen is

157

UNCERTIFIED ROUGH DRAFT

1 not in there, no.

2 Q.

3 A. It didn't cite penocolappy there either

4 so --

5 Q. I'm confused. Dr. Clarke-Pearson,

6 because this deposition is on Zoom, I've asked you

7 multiple times, I'm asking you again, if you are

8 looking at a document that is not up on the screen,

9 you need to let me know.

10 A. I wasn't aware that was a rule. I've

11 got --

12 Q. I asked you before.

13 A. I'm sorry, I missed it.

14 BY MS. O'DELL:

15 Q. Are you looking at a document now --

16 are you looking at a document now to respond to my

17 question?

18 MS. O'DELL: Just a moment please

19 Dr. Clarke-Pearson is free to look at what

20 he would like to respond to the questions.

21 MS. DAVIDSON: And I'm free to know

22 what he is looking at.

23 MS. O'DELL: And he's telling you

24 Jessica.

25 MS. DAVIDSON: He didn't -- I didn't --

158

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Excuse me, number one,

2 please don't interrupt me. Number two,

3 please be respectful of Dr. Clarke-Pearson

4 who happens been most courteous despite the

5 tone of your questions. So let's just

6 proceed you got a question about here and

7 available to answer them.

8 MS. DAVIDSON: Thank you Leigh for your

9 colloquy.

10 BY MS. O'DELL:

11 Q. Dr. Clarke-Pearson I was asking you

12 whether the NCIPDQ references Woolen and it sounded

13 like you were looking at. What were you looking

14 at?

15 A. I'll hold it up for you. It's NCIPDQ.

16 Q. And that the version you looked at

17 yesterday?

18 A. Yes.

19 Q. Okay. Can we mark as Tab 10 the N C --

20 I'm sorry as Exhibit 16 the NCIPDQ on ovarian

21 cancer?

22 (Exhibit 10 marked for identification.)

23 BY MS. O'DELL:

24 Q. Can you go to the top please Asher.

25 Dr. Clarke-Pearson is this the same

159

UNCERTIFIED ROUGH DRAFT

1 NCIPDQ document that you looked at yesterday?

2 A. I believe it is. At the top of mine it

3 says October 4, 2023.

4 Q. Okay. If we could move down to where

5 it references ours is October 16, 2023, so is that

6 the different from the one you looked at?

7 MS. O'DELL: Is that on page 27 Asher

8 just so we can.

9 MS. DAVIDSON: I can't hear you Leigh.

10 MS. O'DELL: Is that on page 22 or 27

11 so we follow along with where you are.

12 MS. DAVIDSON: I'm trying to determine

13 if Dr. Clarke-Pearson is looking at the same

14 document on the screen. Do we know the

15 answer to that?

16 MS. O'DELL: He can answer. I believe

17 that to be the case. But he's got it in

18 front of him.

19 THE WITNESS: Everything I see so far

20 looks like what I have in front of me.

21 BY MS. O'DELL:

22 Q. If we could go to the sentence that

23 begins the meta-analysis. Asher are you going to

24 use your new highlighting skills. A meta-analysis

25 of ten case controlled studies can you highlight

160

UNCERTIFIED ROUGH DRAFT

1 that Asher. It disappeared. I don't know what

2 happened. Technical glitch.

3 MR. TRANGLE: It's like a printed

4 document.

5 BY MS. O'DELL:

6 Q. Just point to where the sentence is.

7 You see where it a meta-analysis of ten case

8 controlled studies in a highly selected subset

9 analysis of one prospective cohort study found in

10 association among women who use perineal talc at

11 least twice a week. And then it's followed by

12 footnote 10.

13 Do you see that on the screen doctor>

14 I think it would be easier if you looked on the

15 screen?

16 A. Okay. I'll look at the screen. So a

17 meta-analysis 16 study --

18 Q. No. The third sentence of that

19 paragraph.

20 A. The -- show me which sentence.

21 MS. DAVIDSON: Right there, Asher.

22 There is a way to highlight something like

23 this. Please on our next break ask someone.

24 A. A meta-analysis of ten case controlled

25 study, is that where you are.

UNCERTIFIED ROUGH DRAFT

1 Q. Uh-huh.

2 A. I see the arrow now. And highly subset

3 analysis of one prospective co heart study found in

4 association or the 1.4 to 7 statistically

5 significant by a woman who used perineal talc at

6 least twice a week.

7 Q. Followed by footnote 10?

8 A. 10 uh-huh.

9 Q. What is footnote 10 refer to?

10 A. You'll have to show me.

11 Q. Oh, okay.

12 A. I would presume it's Woolen, but I'm

13 not sure.

14 Q. Is that correct. Does this say here

15 testimony as to whether the NCIPDQ addresses?

16 A. Yes it changes my testimony. This PDQ

17 version doesn't include Woolen.

18 Q. The one you looked at yesterday does

19 not?

20 A. Apparently not.

21 Q. Can you look at footnote 10 at the one

22 you looked at Ned?

23 A. I'm sorry. Ask the question again.

24 Q. Can you look at the hard copy of the

25 one you looked at yesterday and see inspect there

162

UNCERTIFIED ROUGH DRAFT

1 was a footnote 10 addressing Woolen?

2 A. Actually it is here I'm sorry.

3 Q. Okay. So we are looking at the same

4 one and there was just a mistake?

5 A. Yes my oversight.

6 Q. Okay. Let's go back to the top where

7 we were talking about Woolen. The authors refer to

8 a highly selective subset analysis of one

9 prospective cohort study what are they referring to

10 there?

11 A. Once again they're talking about

12 Woolen.

13 Q. When the authors say highly selected

14 subset of one prospective cohort study, what does

15 that refer to?

16 A. That's the interpretation of whoever

17 wrote this P D Q.

18 Q. It says a meta-analysis of ten case

19 controlled studies and a highly selected subset

20 analysis of one prospective cohort study. What

21 does that phrase a highly selected subset analysis

22 of one prospective cohort study refer to?

23 A. Refers to Woolen just like I said.

24 Q. Woolen is the highly selected subset

25 analysis of one prospective cohort study?

163

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Objection to form.

2 THE WITNESS: Yes because the

3 meta-analysis the ten case controlled

4 studies wouldn't include Woolen because

5 Woolen doesn't include only case controlled

6 studies, it includes the cohort study as

7 well.

8 BY MS. O'DELL:

9 Q. Which prospective cohort study is the
10 phrase referring to?

11 A. Prospective cohort study would be the
12 data from O'Brien that's included in the Woolen
13 study.

14 Q. Why does NCI state that it's a highly
15 selected subset analysis?

16 A. I'm not sure why they use those terms
17 it's a subset analysis that's been performed it
18 went through a peer reviewed process published in a
19 reputable journal.

20 Q. The authors go on to state the subset

21 analysis of the prospective study was inconsistent
22 with the main findings of the original report. Do
23 you see that sentence?

24 A. Yes.

25 Q. What does that refer to?

164

UNCERTIFIED ROUGH DRAFT

1 A. It was referring back to whatever

2 number 11 is which is O'Brien study.

3 Q. Can we go back up, Asher?

4 A. In 2020.

5 Q. What do the authors mean by Asher

6 something weird has happened. Can you go back to
7 the paragraph we were on. What did the authors
8 mean when they say the subset analysis of the
9 prospective study was inconsistent with the main
10 findings of the original report?

11 A. The data that's in the -- in Woolen is
12 different than the data that was in the original
13 O'Brien. So ten has different data than 11 those
14 references.

15 Q. And what is inconsistent?

16 MS. O'DELL: Objection to form.

17 THE WITNESS: I'm sorry, what did what
18 consist of?

19 BY MS. O'DELL:

20 Q. What do the authors mean can you tell

21 me what's inconsistent how is did subset analysis

22 inconsistent with the main findings of O'Brien?

23 A. Well, that's the authors interpretation

24 I wouldn't say it's inconsistent. They are two

25 different data sets and O'Brien submitted to Woolen

165

UNCERTIFIED ROUGH DRAFT

1 data from the original nurse's health study that

2 specifically addressed frequency of use in patients

3 with patent two so it's not inconsistent it's just

4 different.

5 Q. The author says it's inconsistent with
6 the main findings of the original report. What
7 were the main findings of O'Brien 2020?

8 MS. O'DELL: Objection.

9 THE WITNESS: I'd have to look at
10 O'Brien 2020 but I think there was increased
11 risk of talcum powder increased risk of
12 ovarian cancer in patients that used talcum
13 powder that had patent tubes.

14 BY MS. O'DELL:

15 Q. Was that the main finding of the

16 report?

17 MS. O'DELL: Objection to form.

18 THE WITNESS: That's my recollection.

19 BY MS. O'DELL:

20 Q. Because of the structure of this

21 analysis, the results should be interpreted with

22 care. What do the authors mean by that?

23 A. I think all interpretations should be

24 undertaken with care they're just advising take a

25 look at it.

166

UNCERTIFIED ROUGH DRAFT

1 Q. Based on this discussion has Woolen

2 changed the N C I P D Q's views about the potential
3 relationship between Talc and ovarian cancer?

4 A. Apparently it hasn't changed NIH NCI
5 view. Clearly it's incomplete analysis by NIH.

6 They have many references that are missing. They
7 didn't do their own meta-analysis of their own
8 evaluation they're citing some papers in a
9 meta-analysis.

10 Q. Have you ever reached out to NCI or NIH
11 to share your views about Talc and ovarian cancer?

12 A. No, I have not.

13 Q. Have you ever reached out to O'Brien or

14 Wentzensen to share your views about Talc or

15 ovarian cancer?

16 A. No.

17 Q. Do you have any reason to doubt the

18 ability of O'Brien and Wentzensen as scientists or

19 epidemiologists?

20 MS. O'DELL: Object to the form.

21 THE WITNESS: I think there's a number

22 of comments that have been published in

23 letter to the editor outlining a number of

24 criticisms about that publication.

25 BY MS. O'DELL:

UNCERTIFIED ROUGH DRAFT

1 Q. Have any of the letters that have been
2 published criticizing O'Brien and Wentzensen been
3 written by someone who is not a plaintiffs expert
4 in the litigation?

5 MS. O'DELL: Object to the form.

6 THE WITNESS: I know that Dr. Kramer
7 who's a plaintiffs expert has written a
8 fairly lengthy letter to the editor outlines
9 a number of issues that he would contend are
10 incorrect and should be changed and altered
11 in the interpretation. I think there are

12 other authors that have authored other

13 papers not aware of names and whether

14 they're involved with plaintiffs legal

15 actions or not.

16 BY MS. O'DELL:

17 Q. Would it surprise you to know that

18 nobody has written alert to editor with respect to

19 O'Brien and Wentzensen who is not a plaintiffs'

20 expert in this litigation?

21 MS. O'DELL: Objection asked and

22 answered.

23 THE WITNESS: I would just have to see

24 all the letters.

25 BY MS. O'DELL:

168

UNCERTIFIED ROUGH DRAFT

1 Q. I see. Are you aware sitting here
2 today of anybody who's not a plaintiffs experts in
3 the litigation who has written alert with respect
4 to O'Brien or Wentzensen's?

5 MS. O'DELL: Object to form. He stated
6 he doesn't know who's written the letter or
7 whether they're in litigation or not.

8 BY MS. O'DELL:

9 Q. Leigh, you have just coached the

10 witness. I appreciate it. Please stop doing it.

11 Dr. Clarke-Pearson sitting here today

12 are you aware of anyone who is not an expert for

13 plaintiffs in Talc litigation who has written any

14 letters involving any publication also about Talc

15 by O'Brien and Wentzensen?

16 MS. O'DELL: Objection to form.

17 THE WITNESS: As I said before, I would

18 have to go back and look at what's been

19 published in letter to the editor before I

20 could answer your question.

21 BY MS. O'DELL:

22 Q. Do you have any views about Dr. O'Brien

23 or Dr. Wentzensen's abilities as a scientist?

24 A. Scientist, I think none of us are

25 perfect.

169

UNCERTIFIED ROUGH DRAFT

1 Q. Hmm?

2 A. I said none of us are perfect. I'm

3 sure they're not either.

4 Q. Do you know anything about either

5 Dr. O'Brien or Dr. Wentzensen's professional

6 reputation?

7 A. I don't. I think I said already I

8 didn't know anything about them.

9 Q. Are you aware that a federal court

10 excluded Dr. Smith-Bindman's meta-analysis in a

11 Talc that a state court excluded Dr. Smith-Bindman

12 meta-analysis in a Talc case?

13 MS. O'DELL: Objection.

14 THE WITNESS: I was not aware of that,

15 no.

16 BY MS. O'DELL:

17 Q. Instance you're not aware of that I

18 take it you didn't review that opinion?

19 MS. O'DELL: Object to the form.

20 THE WITNESS: I didn't know there was

21 an opinion.

22 BY MS. O'DELL:

23 Q. Are you familiar with Dr. McTiernan?

24 A. Yes.

25 Q. Who's she?

170

UNCERTIFIED ROUGH DRAFT

1 A. She is epidemiologist.

2 Q. Does your view that new scientist

3 perfect extend to Dr. Saed and Dr. Smith-Bindman as

4 well?

5 MS. O'DELL: I'm sorry I didn't would

6 you please repeat it.

7 BY MS. O'DELL:

8 Q. Court reporter?

9 (The reporter read back the last question.)

10 A. Yes I just said that all of us -- none

11 of us are perfect.

12 Q. Can you point to in Dr. Saed's paper

13 Harper 2023?

14 A. Can I point to any what.

15 Q. Flaws?

16 MS. O'DELL: Object to form.

17 THE WITNESS: Flaws.

18 BY MS. O'DELL:

19 Q. Uh-huh?

20 A. Not at this point in time, no.

21 Q. Can you point to any flaws in Woolen?

22 MS. O'DELL: Object to form.

23 THE WITNESS: No.

24 BY MS. O'DELL:

25 Q.

171

UNCERTIFIED ROUGH DRAFT

1 A. There are limitations that are cited by

2 the authors in their papers. I don't call those

3 flaws.

4 Q. You included a forest plot in your

5 amended expert report; is that correct?

6 A. I did.

7 Q. How did you get that forest plot?

8 A. It was supplied by Dr. McTiernan it was

9 an updated forest plot similar to, but updated from

10 the one I used in the previous report.

11 Q. Who provided it to you?

12 A. My attorney.

13 Q. Did you independently examine the

14 forest plot for accuracy before putting it in your

15 report?

16 A. I reviewed it. I didn't go case by --

17 paper by paper to re look at the numbers.

18 Q. Did you check if it was missing any

19 studies?

20 A. I'm sorry.

21 Q. Did you check if it was missing any

22 studies?

23 A. I think at the date and time when I

24 received it which I don't recall exactly, I thought

25 it was up to date.

1 Q. Are you aware that a federal court
2 excluded Dr. McTiernan's opinions as unreliable in
3 the Zantac litigation?

4 MS. O'DELL: Object to form.

5 THE WITNESS: No I wasn't.

6 BY MS. O'DELL:

7 Q. Are you aware that Dr. McTiernan has
8 testified that she followed the same scientific
9 methodology in Zantac as she did in Talc?

10 MS. O'DELL: Object to the form.

11 THE WITNESS: Not aware of her
12 testimony.

13 BY MS. O'DELL:

14 Q. Are you aware of any independent
15 scientist not retained by plaintiffs in this
16 litigation who has concluded that Talc use uses
17 ovarian cancer?

18 A. I'm sorry who.

19 Q. Are you aware of any independent
20 scientist not retained by plaintiffs in this
21 litigation who has concluded that Talc use causes
22 ovarian cancer?

23 A. Well we can look at forest plot you're
24 looking at right here and see a number of the case
25 controlled studies that are all -- that are

173

UNCERTIFIED ROUGH DRAFT

1 statistically significant. Those as I believe are
2 all independent scientists that are published.
3 Those case controlled studies then go on to
4 meta-analysis all of which statistically
5 significant. I'm not aware of them being
6 plaintiffs defendants either.

7 Q. Did any of those authors state that
8 their studies did any of those authors state in
9 their papers that they've concluded that Talc use
10 causes ovarian cancer?

11 A. I think they showed a statistical
12 significant increase risk of developing ovarian
13 cancer because of the use of talcum powder.

14 Q. That was not my question.

15 MS. O'DELL: Jessica let him finish.

16 BY MS. O'DELL:

17 Q. Dr. Clarke-Pearson, can you please
18 answer my question. Are you aware of any of the
19 scientist not retained by plaintiffs in this
20 litigation who has stated that Talc use can cause
21 ovarian cancer?

22 MS. O'DELL: Object to the form.

23 THE WITNESS: So the word you're using

24 is cause, is that where we're pivoting.

25 BY MS. O'DELL:

174

UNCERTIFIED ROUGH DRAFT

1 Q. Correct?

2 A. I'm not sure -- I would have to reread

3 these papers to know whether they were somehow

4 screening those papers to see whether they use the

5 word cause. Clearly come up with a finding that is

6 statistically associated with the development of

7 ovarian cancer which to me means cause.

8 Q. So is it your testimony that any time

9 there's an association that means cause?

10 MS. O'DELL: Object to the form.

11 THE WITNESS: No.

12 BY MS. O'DELL:

13 Q. I think that's what you just said you

14 said statistically association which to me means

15 cause; correct?

16 A. I think a lot of people would interpret

17 it as cause.

18 Q. Again sitting here today you can't

19 identify a single independent scientist not

20 retained by plaintiffs in this litigation who has

21 stated that Talc use causes ovarian cancer;

22 correct?

23 MS. O'DELL: Object to the form.

24 THE WITNESS: Not that I can recall to

25 answer your question.

175

UNCERTIFIED ROUGH DRAFT

1 BY MS. O'DELL:

2 Q. Are you aware of any published paper in

3 the scientific literature by an independent

4 scientist who not a paid expert in this litigation

5 that includes that Talc use causes ovarian cancer?

6 MS. O'DELL: Object to form asked and

7 answered also re treads ground that was

8 previously covered in prior depositions.

9 And so if you have a question about a

10 specific paper that has been included in

11 Dr. Clarke-Pearson's report since July of

12 2021, you know, then I would ask you to

13 direct your questions to those publications,

14 not a re review of everything he has looked

15 at over the course of this six year

16 litigation.

17 BY MS. O'DELL:

18 Q. Leigh this is ongoing effort by you to

19 strike this deposition?

20 MS. O'DELL: It is not it is to state

21 my objection ton the record.

22 BY MS. O'DELL:

23 Q. I will keep any flee Dr. Clarke-Pearson

24 sitting here today are you aware of any published

25 literature any published paper in this scientific

176

UNCERTIFIED ROUGH DRAFT

1 literature by an independent scientist who not a

2 paid expert in this litigation that reaches the

3 conclusion that Talc use cause causes ovarian

4 cancer?

5 A. Not aware of that, no.

6 Q. Are you aware of any single scientific

7 body in the United States that has included that

8 Talc use cause ovarian cancer?

9 A. So a number of scientific bodies have

10 identified asbestos as causing ovarian cancer. We

11 know that asbestos is in ovarian cancer in

12 Johnson's baby powder. So in many ways I view baby

13 powder with asbestos as a carcinogen that causes

14 ovarian cancer.

15 Q. Do you have --

16 A. So there are a number of scientific

17 organizations that have identified asbestos as

18 causing ovarian cancer included IARC, EPA, and

19 others.

20 Q. Are you aware of a single scientific

21 body in the United States has stated that cosmetic

22 Talc use causes ovarian cancer?

23 MS. O'DELL: Object to the form asked

24 and answered.

25 THE WITNESS: I will go to IARC for one

177

UNCERTIFIED ROUGH DRAFT

1 that says the that the source of Talc

2 outside of mining and industrial exposure is

3 most likely secondary to cosmetic exposure.

4 BY MS. O'DELL:

5 Q. Again I'm going to ask the question are

6 you aware of a single scientific body in the United

7 States that has stated that cosmetic Talc use

8 causes ovarian cancer?

9 MS. O'DELL: Objection form. Asked and

10 answered.

11 THE WITNESS: Cosmetic Talc Johnson's

12 baby powder has asbestos in it. Asbestos

13 causes ovarian cancer. Many organizations

14 at the highest level of our government and

15 scientific community have identified

16 asbestos as causing ovarian cancer.

17 BY MS. O'DELL:

18 Q. Can you identify a single scientific

19 body in the United States that has stated cosmetic

20 Talc causes ovarian cancer?

21 MS. O'DELL: Objection to form. The

22 question was just asked Dr. Clarke-Pearson

23 give his answer. Dr. Clarke-Pearson, you're

24 welcome to respond again but if you if it's

25 the same answer previously again you can so

UNCERTIFIED ROUGH DRAFT

1 say that.

2 BY MS. O'DELL:

3 Q. Leigh you're pattern of obstructing

4 this deposition and coaching the witness.

5 Dr. Clarke-Pearson with all due respect you are not

6 answering the question I asked.

7 My question is whether there is any

8 United States scientific body, any scientific body

9 in the United States that has stated that cosmetic

10 Talc use causes ovarian cancer?

11 MS. O'DELL: Objection to form. Asked

12 and answered. Please do not badger

13 Dr. Clarke-Pearson or be disrespectful.

14 THE WITNESS: If you're focusing only

15 on the term Talc then I'm not aware of that.

16 But Talc has asbestos in it.

17 BY MS. O'DELL:

18 Q. Dr. Clarke-Pearson do you have an

19 opinion as to what percentage of Johnson's baby

20 powder that's been sold in this country contained

21 asbestos?

22 A. Relying on Dr. Longo's analysis it's

23 more likely than not and in some cases for example

24 Chinese Talc nearly all of it is. At least fibrous

25 Talc if not other asbestos.

179

UNCERTIFIED ROUGH DRAFT

1 Q. So it's your opinion?

2 A. Fibers.

3 Q. Do you have an opinion as to what

4 percentage of Johnson's baby powder sold in the

5 United States over the last 50 years contains

6 asbestos?

7 MS. O'DELL: Objection asked and

8 answered you may respond.

9 THE WITNESS: Dr. Long oh's data goes

10 back and the sources of talcum powder for
11 Johnson's baby powder from three different
12 sources over three different time periods
13 that has different levels of as talcum as I
14 lead all of which are in excess of
15 50 percent.

16 BY MS. O'DELL:

17 Q. All of your opinions about whether or
18 not Johnson's baby powder contains asbestos based
19 on Dr. Longo's report?

20 A. No. The FDA found asbestos brought it
21 off the shelf.

22 Q. How many lots of Johnson's baby powder

23 did the FDA find asbestos in?

24 A. I think Johnson & Johnson took one lot

25 of 3,000 bottles off the shelf based on the

180

UNCERTIFIED ROUGH DRAFT

1 analysis.

2 Q. FDA found asbestos in one lot of

3 Johnson's baby powder?

4 A. Yes.

5 Q. And was that a trades level or a sub

6 trades level?

7 MS. O'DELL: Object to the form.

8 THE WITNESS: I don't know how to

9 define a trades level.

10 BY MS. O'DELL:

11 Q. Because you're not expert on asbestos;

12 right?

13 MS. O'DELL: Objection.

14 THE WITNESS: I'm not sure what you

15 mean by -- I know what asbestos does to

16 women that have ovaries.

17 BY MS. O'DELL:

18 Q. Dr. Clarke-Pearson, can you point to me

19 to any epidemiological studies showing that the

20 level of asbestos to which a woman is allegedly

21 exposed from talcum powder can cause ovarian

22 cancer?

23 MS. O'DELL: Objection to form.

24 Incomplete hypothetical.

25 THE WITNESS: I'm unaware of any

181

UNCERTIFIED ROUGH DRAFT

1 threshold if you will or minimum amount of

2 asbestos that would or would not cause

3 ovarian cancer.

4 BY MS. O'DELL:

5 Q. Is sit your opinion that talcum powder
6 that does not contain asbestos causes ovarian
7 cancer?

8 A. I'm not aware of any talcum powder
9 based on the data that I've seen that doesn't
10 contain asbestos.

11 Q. If a woman to use cosmetic Talc that
12 doesn't contain asbestos would she be at increased
13 of ovarian cancer?

14 A. I would think that evidence shows that
15 if you make the hypothetical there's no asbestos in
16 it then the talcum powder and the all a if you
17 had's have been done and hypothetically that those

18 patients were exposed those women were exposed to
19 talcum powder that didn't have asbestos they still
20 had a higher risk of ovarian cancer caused by
21 talcum powder.

22 Q. Do you believe that the mechanism by
23 which talcum powder can cause ovarian cancer is the
24 same for talcum powder that contains asbestos and
25 talcum powder that doesn't contain asbestos?

182

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Objection to question this
2 is re treading ground that was covered in I

3 believe it was January or February 2019

4 almost concluded and Dr. Clarke-Pearson

5 already answered the questions.

6 BY MS. O'DELL:

7 Q. Can doctor because Dr. Moss he dial it

8 takes twice as long to ask every question court

9 reporter?

10 MS. O'DELL: That's incorrect you know

11 I'm just what you stated is an error on the

12 record. Please ask your question.

13 (The reporter read back the last question.)

14 A. Yes.

15 Q. Okay. Let's go off the record.

16 (Recess taken from 1:23 p.m. until 1:25 p.m.)

17 BY MS. DAVIDSON:

18 Q. So number 1 court's order is very clear

19 that case specific experts align deposed for I'm

20 going to read the order exactly.

21 MS. O'DELL: Dr. Clarke-Pearson has

22 already been deposed for 14 hours --

23 MS. DAVIDSON: You're literally --

24 you're literally interrupting me.

25 MS. O'DELL: On his case specific

1 opinions and that occurred in August of --

2 MS. DAVIDSON: You're interrupting me,

3 Leigh. You literally interrupted me

4 mid-sentence.

5 MS. O'DELL: Well --

6 MS. DAVIDSON: According to order as I

7 was saying before I was interrupted

8 depositions of experts who address case

9 specific issues to individual plaintiffs in

10 addition to providing new or supplemental

11 reports on general causation shall be

12 limited to a total of one day, seven hours.

13 If the expert issues case specific reports
14 in three or more cases, in which case the
15 deposition is limited to two days, 14 hours
16 of testimony time. This order was issued
17 several months ago. If you guys to be in
18 violation of the order, we will take it up
19 with the Court. I would like also like to
20 point out --

21 MS. O'DELL: Our position is Jessica
22 just to be clear we are not in violation of
23 the order because Dr. Clarke-Pearson has
24 already sat for two days, seven hours each,
25 for his case specific opinions. The purpose

UNCERTIFIED ROUGH DRAFT

1 of the deposition today was to examine him
2 on any new references or any new -- in his
3 report that was served November 2023 or any
4 new opinions that he might have. He's been
5 available today. That deposition is limited
6 to four hours. That's how we understand the
7 order and that's how we're proceeding.
8 That's how we proceeded previously with the
9 depositions of these experts including last
10 week. So I just -- that's our position. We

11 can agree to disagree. But today just so
12 you're clear and you understand, we've been
13 on the record for 3 hours and 39 minutes,
14 and there's 21 minutes left.

15 MS. DAVIDSON: I understand that you
16 have decided not to fulfill the court's
17 order and that's your prerogative. We will
18 take it up with the court and make very
19 clear to the court that we read the ruling
20 into the record. And you chose not to
21 follow it. Leigh, I would also like to
22 raise with you before we get into this
23 tomorrow that Dr. Moorman, we were never

24 served with her 2021 report, and so we are

25 entitled to eight hours, four hours on her

185

UNCERTIFIED ROUGH DRAFT

1 2021 report and four hours on her 2023

2 report.

3 MS. O'DELL: I'm going to let Michelle

4 respond to that.

5 MS. DAVIDSON: I'm going to give you

6 the heads up.

7 MS. O'DELL: We should be off the

8 record though for that.

9 MS. DAVIDSON: We can go off the

10 record.

11 MS. O'DELL: Before we do that, I would

12 just ask since we are going to stop at four

13 hours today, can we proceed with the

14 remaining 21 minutes?

15 MS. DAVIDSON: I need a break.

16 MS. O'DELL: And then conclude. You

17 need a break? You're saying you need a

18 break.

19 MS. DAVIDSON: I need a break.

20 MS. O'DELL: If you cannot continue for

21 21 minutes --

22 MS. DAVIDSON: I need a break.

23 MS. O'DELL: We will be available in

24 15 minutes to -- certainly want you to have

25 a break. And then we'll come back in

186

UNCERTIFIED ROUGH DRAFT

1 15 minutes at 1:30 and you can finish.

2 MS. DAVIDSON: It's 1:28. It's 1:28.

3 1:30 would be in two minutes.

4 MS. O'DELL: I'm sorry. 1:45 is what I

5 meant to say.

6 (Recess taken from 1:28 p.m. until 1:52 p.m.)

7 BY MS. DAVIDSON:

8 Q. Dr. Clarke-Pearson, are you familiar
9 with Talc pleurodesis?

10 A. Yes.

11 Q. You testified earlier that you believed
12 that cosmetic Talc is virtually all contaminated
13 with asbestos; correct?

14 A. Yes.

15 Q. Is that your opinion about
16 pharmaceutical Talc as well?

17 A. I don't have an opinion about
18 pharmaceutical grade Talc.

19 Q. Have you reviewed the literature on

20 Talc pleurodesis?

21 A. No, I have not reviewed the literature

22 I'm familiar with the technique having used it on

23 patients that I've taken care of.

24 Q. When you used that procedure on

25 patients that you've taken care of do you believe

187

UNCERTIFIED ROUGH DRAFT

1 that you injected asbestos into their lungs?

2 MS. O'DELL: Object to the form.

3 THE WITNESS: I'm not sure what's in

4 the pharmaceutical grade of Talc.

5 BY MS. DAVIDSON:

6 Q. Has IARC addressed whether pleurodesis

7 can cause cancer?

8 MS. O'DELL: Objection. Form.

9 THE WITNESS: I'm not familiar that

10 they have the IARC documents are quite

11 extensive so I may have missed something.

12 BY MS. DAVIDSON:

13 Q. Do you know whether pharmaceutical

14 grade Talc and cot met I can Talc can come from the

15 same mines?

16 A. I don't know.

17 Q. Are you aware that the FDA tested Talc
18 in 2010, 2019, 2021 and 2022 and on all of those
19 occasions found no asbestos?

20 MS. O'DELL: Object to the form.

21 THE WITNESS: I was not aware of that,
22 no.

23 BY MS. DAVIDSON:

24 Q. Do you think the FDA was wrong in 2010
25 when it found no asbestos in Talc?

188

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: Object to the form.

2 THE WITNESS: I have no opinion about

3 that. I have I don't know to what extent

4 they tested, what extent they used. I don't

5 know how many samples they tested. So I

6 don't have an opinion about that.

7 BY MS. DAVIDSON:

8 Q. Do you have an opinion -- do you

9 believe the FDA was wrong in 2019 when it tested

10 cosmetic Talc and found no asbestos?

11 MS. DAVIDSON: Objection form.

12 THE WITNESS: I can only believe what

13 the FDA reported.

14 BY MS. DAVIDSON:

15 Q. Do you believe the FDA was wrong in
16 2021 when it tested cosmetic Talc and found no
17 asbestos?

18 A. I wasn't aware there was testing at
19 that point in time.

20 Q. Do you believe the FDA was wrong in
21 2022 when it tested cosmetic Talc and found no
22 asbestos?

23 MS. O'DELL: Objection. Form.

24 THE WITNESS: Once again, I wasn't
25 aware that they tested.

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. Are you aware the lawyers didn't

3 provide you with those testing results?

4 MS. O'DELL: Objection. Form.

5 THE WITNESS: No.

6 BY MS. DAVIDSON:

7 Q. Would it have been relevant to your

8 opinion to know that the FDA tested cosmetic talc

9 four times and didn't find asbestos?

10 MS. O'DELL: Objection to form.

11 THE WITNESS: No.

12 BY MS. DAVIDSON:

13 Q. That wouldn't be relevant to your

14 opinions?

15 A. No.

16 Q. Did Duke or UNC perform pleurodesis?

17 A. Have I asked that to be done on my

18 patients? Yes.

19 Q. Have you ever suggested to Duke or to

20 UNC that they stopped performing pleurodesis

21 because of the risk of injecting asbestos into

22 patients?

23 A. No most of my patients that needed

24 pleurodesis were dying of ovarian cancer I was

25 trying to give them some relief from respiratory

190

UNCERTIFIED ROUGH DRAFT

1 distress.

2 Q. So wouldn't mattered to you if that

3 procedure put into someone's --

4 MS. O'DELL: Objection to form.

5 BY MS. DAVIDSON:

6 Q. -- asbestos into someone's lungs?

7 A. I knew latency period for Talc and

8 cause cancer was years and these women had months

9 and days to live. So, no, I didn't. Wasn't really

10 a consideration.

11 Q. Is it your opinion that pleurodesis

12 would be a proper procedure even if it injected

13 asbestos into people's lungs?

14 MS. O'DELL: Objection to form.

15 THE WITNESS: Depends upon the

16 circumstances.

17 BY MS. DAVIDSON:

18 Q. Have you ever told U N CV or Duke

19 you're concerned that the pleurodesis procedure is

20 injecting a asbestos into people's lungs?

21 MS. O'DELL: Object to form.

22 THE WITNESS: I don't know it's

23 injecting Talc -- that the pleurodesis is

24 injecting asbestos into the lungs.

25 BY MS. DAVIDSON:

191

UNCERTIFIED ROUGH DRAFT

1 Q. When?

2 A. I don't have any data on that topic.

3 Q. When did you come to the opinion

4 that most Talc cosmetic Talc contains asbestos?

5 MS. O'DELL: Objection form.

6 THE WITNESS: When I started seeing

7 Dr. Long oh's reports in particular.

8 BY MS. DAVIDSON:

9 Q. As a scientist, you believe your job is
10 to evaluate all the relevant evidence; right?

11 A. Yes. That's part of the comprehensive
12 differential diagnosis. Go ahead.

13 Q. Are you aware that defendants have an
14 expert named Mac Sanchez from RJ Lee who has
15 rebutted Dr. Longo's report?

16 MS. O'DELL: Objection to form.

17 THE WITNESS: Not aware I have not seen
18 or not aware of another expert.

19 BY MS. DAVIDSON:

20 Q. Have you asked plaintiffs lawyers to
21 give you all the relevant evidence about asbestos
22 testing?

23 MS. O'DELL: Objection to form.

24 THE WITNESS: I have not asked for
25 that.

192

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. Would it have been relevant to your
3 opinion to review Mr. Sanchez's report?

4 MS. O'DELL: Objection.

5 BY MS. DAVIDSON:

6 Q. Responding to Mr. Long oh owes testing
7 for asbestos?

8 MS. O'DELL: Objection form.

9 THE WITNESS: Might have been relevant.

10 I wasn't aware there was anybody else
11 offering opinions.

12 BY MS. DAVIDSON:

13 Q. You'd agree if there's available
14 science refuting Dr. Long oh's or rebutting
15 Dr. Long oh's opinions that would be relevant to
16 you for review in reaching a conclusion with
17 respect to asbestos and talc; correct?

18 MS. O'DELL: Objection to form

19 misstates record.

20 THE WITNESS: Certainly.

21 BY MS. DAVIDSON:

22 Q. Dr. Clarke-Pearson, you attached to

23 your 111502023 expert report and amended list of

24 materials considered; correct?

25 A. Yes.

193

UNCERTIFIED ROUGH DRAFT

1 Q. Was that a list you created or did the

2 lawyers create that for you?

3 A. They created it after we collaborated
4 and came up with a list of references that I was
5 using.

6 Q. Did you read all the documents that are
7 listed on that materials reviewed list?

8 A. I have scanned many of them looked at
9 their abstracts. Read some of them in quite
10 detail.

11 Q. How did you decide which -- when to
12 just read the abstract and when to read an article
13 in full?

14 MS. O'DELL: Just say two things for
15 the record. Jessica number 1 are you asking

16 about the recently added references because

17 he's been examined at length about the

18 references that were or materials that were

19 included in his list in his November 2018

20 report and then second I want to make sure

21 that you had the updated list of materials

22 that were provided three days before

23 Dr. Clarke-Pearson's deposition.

24 BY MS. DAVIDSON:

25 Q. I would like to state for the record

1 this is another example of you obstructing and
2 filibustering the deposition because my question
3 very clearly referred to 11/15/2023 reliance list.

4 MS. O'DELL: You asked him a global
5 question about everything on the list. He's
6 previously been asked that question and he's
7 testified to it. And as you know this is a
8 update deposition. This is not a retread of
9 everything. And the second I'm just asking
10 did you receive in the drop box the updated
11 materials list I just wanted to make sure we
12 were communicating and Dr. Clarke-Pearson
13 had in front of him the list that you're

14 talking about.

15 BY MS. DAVIDSON:

16 Q. It is now 2:00. I will put the list up

17 after your hearing. But I will not end this

18 deposition in the middle of question. So I need an

19 answer to this question that's pending before we

20 take our break for your hearing.

21 Dr. Clarke-Pearson, did you how did you

22 decide with respect to the materials on your

23 amended reliance list, how did you decide when to

24 read an article in full or when to just read the

25 abstract?

UNCERTIFIED ROUGH DRAFT

1 A. Good question. First of all, when I
2 did my search I would look at the title and see if
3 it was all relevant to what I was looking for and
4 then if it was then I would open that document up
5 usually PubMed and the scan can go straight to them
6 then in the abstract and if it was something I
7 wanted more detail on, give you the whole paper.

8 Q. Okay. It's 2 o'clock I know you guys a
9 have a hearing. We'll reconvene when I hear from
10 you.

11 (Recess taken from 2:01 p.m. until 3:43 p.m.)

12 BY MS. DAVIDSON:

13 Q. Dr. Clarke-Pearson, how did you

14 identify the new studies that are listed on your

15 supplemental reliance list?

16 A. Well, a combination I think we talked

17 about searching PubMed in particular actually use

18 Google once in a while to search for key words Talc

19 being a keyword. Ovarian cancer and Talc being a

20 combination that I would use on PubMed. So

21 identified a number that way as time goes on. As

22 times's gone on since the last deposition. I've

23 also been sent to references, papers from

24 Ms. O'Dell.

25 Q. Is there away for me to know which

196

UNCERTIFIED ROUGH DRAFT

1 items on your second amended reliance list you

2 found on your own and which were sent to you by

3 Ms. O'Dell?

4 A. Oh, man I've looked at them for so many

5 times I can't tell you where who identified which.

6 Sorry.

7 Q. You testified in 2021 that you're not

8 relying on company documents to support your

9 opinions; is that correct?

10 A.

11 MS. O'DELL: Object to the form.

12 THE WITNESS: Yes, that's correct.

13 BY MS. DAVIDSON:

14 Q. Is that still the case?

15 A. Yes.

16 MS. O'DELL: Object to form.

17 BY MS. DAVIDSON:

18 Q. Did you add any company documents to

19 your second amended reliance list?

20 A. I don't recall.

21 Q. If you could look at Item 121 it's put

22 that up on the screen Asher. We're marking your
23 second supplemental reliance list as Exhibit 17 and
24 let's go to Item 121?

25 MR. TRANGLE: 121 okay.

197

UNCERTIFIED ROUGH DRAFT

1 BY MS. DAVIDSON:

2 Q. And at 121 says JNJTalc C001465273. Do
3 you recall adding that to your supplemental
4 reliance list?

5 A. I -- I don't, no.

6 MS. O'DELL: If you're identifying --

7 excuse me, if you're identifying something

8 by Bates Number which obviously there are

9 hundreds of combinations of Bates numbers

10 which would be difficult for anyone to

11 remember much less in relation to all of the

12 things that Dr. Clarke Dr. Clarke-Pearson

13 reviewed if there's a specific document you

14 could pull it up and he could identify it by

15 something other than the Bates Number.

16 MS. DAVIDSON: Well, Leigh, I have

17 asked --

18 MS. O'DELL: Seems to be unfair way to

19 try to identify document for him.

20 MS. DAVIDSON: Leigh, I've asked you

21 multiple times today to please keep your

22 objections to objections to form. Your

23 testimony is not called for here. You're

24 not the witness. And it is inappropriate

25 under federal law that you continue to try

198

UNCERTIFIED ROUGH DRAFT

1 to testify and tell the witness what to say.

2 BY MS. DAVIDSON:

3 Q. Dr. Clarke-Pearson, correct that you

4 stated that you don't recall what this document is;

5 right?

6 A. I don't even what -- you've talked

7 about Document 121.

8 Q. 121 yes?

9 A. Yes I don't know what that is.

10 Q. Asher could you please mark as Exhibit

11 18 document bates number J N J Talc 001465273 which

12 is a March 17, 2020, comprehensive review.

13 Dr. Clarke-Pearson, do you recall 24 document now

14 that it's in front of you?

15 A. I just see a title so far on the

16 document.

17 Q. Is the title familiar to you?

18 MS. O'DELL: I think I would request

19 you put it in the chat so Dr. Clarke-Pearson

20 can see the document.

21 BY MS. DAVIDSON:

22 Q. Is this title familiar to up

23 Dr. Clarke-Pearson?

24 A. Vaguely am I not allowed to see the

25 document.

199

UNCERTIFIED ROUGH DRAFT

1 Q. You absolutely can?

2 A. Okay. Bring it on.

3 Q. Asher you want to go to the next page

4 it's a big document?

5 MR. TRANGLE: It's taking awhile to up

6 load to the chat should be added.

7 BY MS. DAVIDSON:

8 Q. 255 pages if you could go to the next

9 page. Perhaps this will refresh

10 Dr. Clarke-Pearson's recollection. Does this

11 refresh your recollection Dr. Clarke-Pearson as to

12 whether you've reviewed this entire document.

13 A. I'm sorry I don't recall this document.

14 Q. Do you know how you -- do you know how

15 you received this document?

16 A. I believe it would be through my

17 attorneys.

18 Q. Did they -- did you ask them for this

19 document and/or did they provide it to without

20 being asked?

21 A. I think they provided it to me.

22 Q. Are you relying on this document in

23 forming your opinions?

24 A. No.

25 Q. Okay. Dr. Clarke-Pearson, if we could

UNCERTIFIED ROUGH DRAFT

1 go back to your expert report, page 13?

2 A. Yes.

3 Q. To your the section of your report on

4 the response. If you could put that up on the

5 screen Asher. Do the I'm Mandarino papers talk

6 about dose response?

7 A. Talk about dose response in terms of

8 the cell biology modification by exposure to

9 different exposures us to Talc, yes.

10 Q. Did Emi involve different exposure

11 metrics?

12 A. I believe it did. I'd have to go back

13 and take a look at it.

14 Q. If Emi did not involve multiple

15 exposure metrics would it be relevant biological

16 dose response?

17 MS. O'DELL: Objection.

18 THE WITNESS: Is that a hypothetical

19 question.

20 BY MS. DAVIDSON:

21 Q. You can answer it as a hypothetical if

22 you Emi involved a single short term exposure you

23 are or a different exposure dosages sure?

24 A. May I look at Emi for a minute.

25 Q. Sure.

201

UNCERTIFIED ROUGH DRAFT

1 A. Thank you.

2 Q. If you'd like I can. If we could put

3 Emi page 1068 up on the screen. Off footnote 40.

4 Can you see that sentence that says we

5 believe we are the first to show. We believe we

6 are the first to show a single short term exposure

7 in vote re to part tell us can be linked to

8 epigenome wide DNA methylation changes.

9 Do you see that?

10 A. Yes, I do.

11 Q. Does a single short term exposure you

12 are tell you anything about dose response?

13 A. Shows about exposure doesn't show about

14 dose.

15 Q. Do you know why you cited Emi under

16 your dose response section of your supplemental

17 report?

18 A. Yes, I believe if you look at Figure 5,

19 you'll see a bar graph that shows dose response.

20 Q. Is that relevant to your Bradford Hill

21 analysis which relates to epidemiology?

22 MS. O'DELL: Object to form.

23 THE WITNESS: The question you're
24 asking me has to do with the dose response
25 and the experimental -- in an experiment

202

UNCERTIFIED ROUGH DRAFT

1 that uses Talc.

2 BY MS. DAVIDSON:

3 Q. In the Bradford hill criteria does the
4 dose response biological gradient consideration go
5 to experimental studies or does it go to
6 epidemiological studies?

7 A. Well as I have my title in my report

8 here it's buy logic gradient/dose response which I
9 interpret to go beyond just talking about dose
10 response in humans to looking at issues that
11 overlap with experiment which is also in the
12 Bradford hill criteria.

13 Q. So do the Bradford hill criteria
14 suggest that under dose response you should
15 consider experimental evidence or is there a
16 separate consideration for experimental evidence?

17 MS. O'DELL: Object to form.

18 THE WITNESS: I think that there's a
19 separate issue that -- a separate criteria
20 in Bradford hill that I understand it that

21 talks about experiments, so doing
22 experiments support the impact causation of
23 talcum powder causing ovarian cancer those
24 are experiments in the laboratory in those
25 laboratory experiments there is a gradient

203

UNCERTIFIED ROUGH DRAFT

1 and dose response in these studies. So I
2 included it in both places.

3 BY MS. DAVIDSON:

4 Q. Okay. Asher can you go back to

5 Figure 5. Can you show me Dr. Clarke-Pearson on

6 Figure 5 where it would suggest that there were

7 different amounts of Talc?

8 A. Well I can't do that for you right now.

9 Maybe -- maybe I'm quoting the wrong figure. Maybe

10 it's Figure 6 is probably the one that we should

11 look at.

12 Q. So looking at Figure 5 which you

13 identified earlier that does not show different

14 amounts of Talc?

15 A. I think I was mistaken. It's actually

16 Figure 6.

17 Q. Can you explain to me how Figure 6

18 shows different amounts of Talc?

19 A. I guess it's the effect of estrogen I'm

20 mistaken I'm sorry.

21 Q. Again does the Emi paper support your

22 opinion that there's a dose dependent effect of

23 talcum powder on molecular changes associated with

24 carcinogenesis?

25 MS. O'DELL: I'm sorry, would you mind

204

UNCERTIFIED ROUGH DRAFT

1 repeating the last bit. Jessica, you

2 trailed off.

3 MS. DAVIDSON: Court Reporter, did you

4 get it.

5 (The reporter read back the last question.)

6 A. Give me one moment. I would like to

7 look at the Harper paper again.

8 Q. We're talking about the Emi paper, not

9 the Harper paper?

10 A. You asked if there's any paper.

11 Q. I said does the Emi paper, E-M-I?

12 A. Okay. That's not what I heard.

13 Q. I heard any, A-N-Y?

14 A. Emi paper, I cannot identify a dose.

15 Q. So was that an error in your report?

16 A. Apparently so.

17 Q. Did Davis 2021 find a dose response?

18 A. Let me turn to Davis 20 2 1.

19 Q. Okay.

20 MS. O'DELL: So we're starting another

21 area of inquiry. Christine, how long have

22 you been going.

23 THE REPORTER: 14 minutes.

24 MS. O'DELL: So that's over 4 hours.

25 All right. Jessica, you understand our

1 position on four hours. And so in terms of
2 further inquiry today you know you've
3 exceeded your time limit. I think we've
4 given you a little extra time so that's our
5 position.

6 MS. DAVIDSON: Are you instructing
7 Dr. Clarke-Pearson not to answer the pending
8 question?

9 MS. O'DELL: There was no pending
10 question. You asked him to look at Davis he
11 was pulling Davis.

12 MS. DAVIDSON: I asked whether Davis
13 identified a dose response.

14 MS. O'DELL: I'll allow him to answer

15 that question and then and then the

16 deposition for today will be concluded.

17 THE WITNESS: There is some dose

18 response demonstrated here in frequency of

19 general powder use in whites I'm sorry

20 correct me I'm wrong on is that.

21 I would say that I don't see that.

22 BY MS. DAVIDSON:

23 Q. Asher can we put Davis 2021 on the

24 screen has that been marked?

25 MR. TRANGLE: It's not.

UNCERTIFIED ROUGH DRAFT

1 MS. O'DELL: It's not marked and you
2 had a question pending. I told him to
3 answer that question he responded and.

4 MS. DAVIDSON: He did not respond.

5 MS. O'DELL: You're over four hours
6 Jessica bottom line.

7 MS. DAVIDSON: For the tenth time you
8 are in violation of the order which makes
9 very clear that I get 14 hours number 1.

10 Which I am not even going to ask I was got
11 number 2nd did not finish he was in the

12 middle of answering whether Davis found a
13 first he did he then he went sure I don't
14 think he's done. I was going to help him
15 out by pointing him to the discussion in
16 Davis dose response so that he could answer
17 the question accurately. If you'd like to
18 leave his inaccurate answer on the record,
19 that's your prerogative. We will go to
20 court.

21 MS. O'DELL: Well, you made your
22 position clear. You're going to court
23 anyway. I believe he answered your

24 question. You're inquiry today was limited

25 to four hours that's our position going to

207

UNCERTIFIED ROUGH DRAFT

1 maintain that. I recognize we have a

2 disagreement so be it the court will have to

3 deal with that. In terms of your further

4 inquiry, I think your questions are

5 concluded for the day. I have three small

6 areas I'll follow up on.

7 MS. DAVIDSON: Wait. Your position is

8 that you're now going to follow up with

9 questions with Dr. Clarke-Pearson and not

10 going to allow me to ask rebuttal to those

11 questions, is that your position?

12 MS. O'DELL: That's correct. You know,

13 we have a time limit, Jessica.

14 MS. DAVIDSON: Yes, we do, and an order

15 14 hours.

16 MS. O'DELL: It's four hours.

17 MS. DAVIDSON: That's false.

18 MS. O'DELL: Let me finish, Jessica.

19 It's not wrong.

20 MS. DAVIDSON: False.

21 MS. O'DELL: He's already --

22 MS. DAVIDSON: False.

23 MS. O'DELL: -- been through 14 hours

24 on his case specific opinions.

25 MS. DAVIDSON: I understand that ruling

208

UNCERTIFIED ROUGH DRAFT

1 is from 2023. I mean you're just continuing

2 to say false statements.

3 MS. O'DELL: You're interrupting. Your

4 rudeness. Please don't interrupt me.

5 MS. DAVIDSON: You have the entire day,

6 A, telling me that I only have 4 hours for a

7 14-hour deposition and then with very long
8 speaking objections to every question in
9 order to filibuster my time. So please
10 don't me tell me I was being rude.

11 MS. O'DELL: That is not accurate and
12 you know that. So I'm going to follow up on
13 three small areas and then the deposition
14 will be concluded for today.

15 EXAMINATION

16 BY MS. O'DELL:

17 Q. So Dr. Clarke-Pearson I have a few
18 questions for you. First what was marked
19 previously as Exhibit 4 I believe was a Yahoo

20 article that you sent to leadership at ACOG and SGO

21 do you recall that discussion?

22 A. Yes, I do.

23 Q. And only a portion of this article was

24 put on the screen for you to see at that time. Now

25 we've had that printed. And I will mark it for

209

UNCERTIFIED ROUGH DRAFT

1 purposes of the record if it's not already -- it's

2 already been marked, excuse me, Exhibit 4.

3 And I'd like for you to look at this

4 article Dr. Clarke-Pearson and specifically look at

5 page 3 of this exhibit. Do you see that?

6 A. Yes.

7 Q. At the bottom. And does this article

8 reference that Johnson's baby powder and other Talc

9 products contained asbestos and caused cancer does

10 it state that?

11 A. In this article says Johnson & Johnson

12 baby powder on other Talc powder contain asbestos

13 and cause cancer which the company denies.

14 Q. And when you were referred to this

15 article as referencing asbestos earlier is that --

16 is that what you were referring to?

17 A. Yes.

18 Q.

19 MS. DAVIDSON: Objection.

20 BY MS. O'DELL:

21 Q. Now if you would Dr. Clarke-Pearson,

22 would you the Woolen study in front of you, if you

23 don't have it?

24 A. I have it.

25 Q. And just for purposes of the record,

210

UNCERTIFIED ROUGH DRAFT

1 that study was previously marked as I believe it

2 was Exhibit 13. And I would ask you if you would

3 turn to Table 2 of the study?

4 A. Okay. I have not.

5 Q. And, Dr. Clarke-Pearson, what is the

6 title of Table 2?

7 A. Process Table 2 publications included

8 in this systematic review most frequent perineal

9 talcum powder reported from each study was

10 abstracted.

11 Q. And so did Dr. Woolen and others make

12 clear that the data they extracted from the studies

13 she included would be the data from those studies

14 that was the most frequent application?

15 A. That's what it says, yes.

16 Q. And so when you were asked questions
17 about Wu and different levels of exposure you are
18 that were included in that study, wouldn't the
19 greatest exposure characterized in Wu be the
20 appropriate data to have included in the Woolen
21 meta-analysis?

22 A. That's what it says in Table 2. I
23 don't recall the table that exactly in Wu but it
24 was as I recall greater than 20 years in a lot
25 of -- we can pull that up if you want. It seemed

UNCERTIFIED ROUGH DRAFT

1 like that was the highest level, yes.

2 Q. And also in regard to Woolen do you

3 have a supplemental tables in front of you for

4 Woolen?

5 A. Yes.

6 Q. And I would like to direct you to

7 supplemental table number 1?

8 A. I have it.

9 Q. And in this table supplemental Table 1,

10 did Woolen and others report the data not only from

11 women with patent fallopian tubes but all women?

12 A. Yes. On the first -- the top part of

13 the table is all women and nonusers less frequent

14 users an daily users.

15 Q. And what was the adjusted hazard ratio

16 for daily users of all women?

17 A. Adjusted was 1.27 with a conference

18 interval of 1.09.

19 Q. And that was statistically significant?

20 A. Yes.

21 Q. And in terms of studies that were

22 included in Woolen, let me ask you specifically

23 regarding women with patent tubes. You were asked

24 some questions about that. Do women who have

25 hysterectomies or tubal ligation have a patent

212

UNCERTIFIED ROUGH DRAFT

1 reproductive tract?

2 A. No I mean this is -- you take out the

3 uterus no way for talcum powder to get to tube so

4 the tubes really aren't functional if the tubes

5 have been tied then they're not patent either.

6 Q. So for study that excluded in the

7 exposed cases women the hysterectomies or tubal

8 ligation, that would essentially be only included

9 women in the cases who have patent tracts?

10 A. If you take out those that have had

11 hysterectomies and tubal ligations, then the

12 remaining patients all this patent tubes.

13 Q. Nothing further, Doctor. Thank you.

14 A. Thank you.

15 MS. DAVIDSON: Before we go off the

16 record, I'm asking you again am I allowed to

17 ask follow-up questions on that. You're not

18 going to let me do that.

19 MS. O'DELL: You know, Jessica, I --

20 MS. DAVIDSON: You're continuing to

21 be --

22 MS. O'DELL: I'm quite confident that

23 when it comes to that point in time when we
24 are examining expert witnesses on behalf
25 of -- as on behalf of the plaintiffs hearing

213

UNCERTIFIED ROUGH DRAFT

1 committee I'm examining the witness who is a
2 defense expert that you will hold me to the
3 minute and second. And we've given you very
4 clear notice about what we feel the ground
5 rules are here under the order. And further
6 we have given you additional minutes and
7 we're not going to give any further.

8 MS. DAVIDSON: You are continuing to
9 violate the order. And in violating the
10 order, not only are you preventing me from
11 having the time that I'm entitled to, but
12 you are also enabling your witness to
13 prepare further for the line of questioning
14 that has begun which is highly
15 inappropriate. And we will raise this with
16 the court. Thank you. We'll go off the
17 record.

18 4:09 p.m.

19

20

21

22

23

24

25